

League of Women Voters®
OF CENTRAL NEW MEXICO
2501 San Pedro Dr NE, Suite 216
Albuquerque, NM 87110-4122

Website: www.lwvcnm.org
Email: office@lwvcnm.org
Phone: (505) 844-8441
[@LWVCNM](https://www.facebook.com/LWVCNM)

- * The League is a nonpartisan political organization.
- * The League never supports or opposes any political party or candidate.
- * The League encourages the informed and active participation of citizens in government.
- * The League works to increase understanding of major public policy issues, and influence public policy through education.
- * The League takes action in supporting or opposing governmental issues based on the Principles and Positions derived from membership agreement following impartial study of the facts.
- * The name, like the mission, derives from the proud legacy of the women's suffrage movement. In 1920, the 19th Amendment to the United States Constitution was finally ratified. The **League of Women Voters®** was launched as an independent organization to help eliminate other forms of political and legal discrimination against women. The League is set up to increase the effectiveness of women's votes in furthering better government for all.
- * Any citizen, male or female, aged 16 or older can join. With membership comes the opportunity to work on local, state, regional and national public policy issues.

LWVCNM Membership Form !

Yes! I want to join the League of Women Voters® of Central New Mexico

Your tax deductible dues are as follows:

First member of a household: \$65
Each additional household member: \$33
Associate member: \$30
Student membership: \$12

Please complete this form and send with a check for the appropriate dues amount, payable to **LWVCNM**, to:

LWVCNM Membership
2501 San Pedro NE, Suite 216
Albuquerque, NM 87110- 4122

OR

You may complete the application online and pay via Paypal (which accepts credit cards) at <https://www.lwvcnm.org/join-renew/>
Questions? Call the LWVCNM office at (505) 844-8441.

Name(s): _____

Address: _____

City: _____

State: _____ Zip: _____

Email: _____

Primary Phone: _____

Secondary Phone: _____

Amount enclosed: _____
(check payable to LWVCNM)

Thank you!

Welcome to the League!