



Please Check One

New Membership Renewing Member – ID if known _____ Donation Only (Skip steps 1, 2 & 3)

1. Please CHECK ONE from the Annual Dues options:

- | | | |
|--|---|---|
| <input type="checkbox"/> Basic Membership | <input type="checkbox"/> \$25 One Year | <input type="checkbox"/> \$50 Two Year |
| <input type="checkbox"/> Supporter | <input type="checkbox"/> \$50 One Year | <input type="checkbox"/> \$100 Two Year |
| <input type="checkbox"/> Statesman | <input type="checkbox"/> \$250 One Year | <input type="checkbox"/> \$500 Two Year |
| <input type="checkbox"/> \$500 Patriot | | |
| <input type="checkbox"/> \$1,000 Lifetime Member | | |
| <input type="checkbox"/> \$5,000 Beacon of Liberty | | |

2. County Affiliation

State Membership includes Membership to One County Affiliate. Please provide your preferred California County:

3. Take the Pledge

The Libertarian Party is the Party of Principle. To proudly affirm our belief and ensure that our party never strays from our principles, we ask our members to sign and date the following statement:

“I certify that I oppose the initiation of force to achieve political or social goals.”

Signature

Date

4. Payment Method

- Check enclosed** (Payable to the Libertarian Party of California)
 Credit Card

If donation only, enter amount:
\$ _____

Card Number

_____/_____
Exp. Date

Name as it appears on card

Signature

5. Contact Information (Please print clearly)

Payment Options:

Name

Address

City

State

Zip

Phone

email

Employer

Occupation

Postal Mail
Libertarian Party of California

770 L Street #950
Sacramento, CA 95814

By Phone
(916) 446-1776 ext. 3

Join or Donate Online
ca.lp.org/join
ca.lp.org/donate

*California state law requires political committees to report the name, address, occupation and the name of the employer for each individual whose contributions aggregate in excess of \$100 in a calendar year. Political contributions are not tax deductible.