

# Join the Libertarian Party of Virginia

**Y**ou are not alone! Sometimes it might feel like it. If you've ever spoken at your local County Board of Supervisors meeting, or sat through a state legislator's "town hall" meeting, you were likely the only one asking for less government. Every one else was simply waddling up to the trough to feed at taxpayer expense.

But we're here, and we're growing. Increase your political clout by joining the Libertarian Party! Tell the world that you aren't fooled by the big-government parties that promise to give you things they don't own!

Join the Libertarian Party of Virginia. Your annual support makes the LP into a much stronger voice for liberty.

**Yes! I want to Join or Renew.**  
Please continue working to restore liberty and a Constitutional, limited government.

## NATIONAL MEMBERSHIP

I want to support the national Libertarian Party by becoming a member. I understand that members of the Libertarian Party "oppose the initiation of force to achieve political or social goals".

Signature: \_\_\_\_\_  
NOTE: If you do not wish to be counted as a member, leave the check box blank and do not sign.

## VIRGINIA MEMBERSHIP

I want to be counted as a member of the Virginia affiliate of the Libertarian Party.

**ELIGIBILITY:** Any person who is currently and has been a member of the national Libertarian Party, who resides and is domiciled in Virginia (as defined by Virginia law) and who has donated at least \$25 (Targeted or Project donations excepted) (or at least \$5 if a current student) to the Libertarian Party of Virginia within the preceding twelve month period, is a member of the Libertarian Party of Virginia.

U.S. citizens who, due to military service, do not reside in Virginia but are registered Virginia voters, or U.S. citizens living overseas who can prove Virginia citizenship, shall be eligible to become members of the LPVA under the same terms as above.

Any resident of Virginia who is a Life Member of the national LP shall be considered a member of the LPVA.

## MEMBERSHIP HAS ITS PRIVILEGES

**VIRGINIA:** By donating at least \$25 to the Virginia LP, members are able to vote at LPVA conventions, seek a seat on Virginia's delegation to the national convention, and hold internal LPVA offices.

**NATIONAL:** Basic national membership is free, but by donating \$25 or more, you will be considered a "Sustaining" member and will be 1) counted towards Virginia's national delegate apportionment and 2) eligible to hold National Committee office.

Contributors donating at least \$50 using this form will automatically receive *LPNews*, the national Party newspaper, and *Virginia Liberty* from LPVA.

**By using this form, you confirm that the following statements are true and accurate:**

- \* I am a United States citizen or a permanent resident alien.
- \* This contribution is not made from the general treasury funds of a corporation, labor organization or national bank.
- \* This contribution is not made from the treasury of an entity or person who is a federal contractor.
- \* The funds I am donating are not being provided to me by another person or entity for the purpose of making this contribution.

\*GOVERNMENT MANDATED NOTICE: Federal law requires political committees to use best efforts to collect and report the name, mailing address, occupation and name of employer for each individual whose contributions aggregate in excess of \$200 in a calendar year. Federal law requires political committees to use best efforts to collect and report the name, mailing address, occupation and name of employer for each individual whose contributions aggregate in excess of \$200 in a calendar year. IRS regulations require us to inform you that contributions to political committees are not tax deductible.

\*GOVERNMENT MANDATED NOTICE: PAID FOR AND AUTHORIZED BY THE LIBERTARIAN PARTY OF VIRGINIA, PO Box 28263, Richmond VA 23228-0263. JEFF BOWLES, CHAIRMAN. Not authorized by any federal candidate or federal candidate campaign committee. Your contribution may be used in connection with federal elections and is subject to the limitations and prohibitions of the Federal Election Campaign Act. Contributions that comply with the limitations and prohibitions of the Act will be deposited into the LPVA federal account, unless otherwise designated for non-federal purposes, and will be used in connection with federal elections, and are subject to the above limitations and prohibitions. Other contributions will be deposited into the LPVA non-federal accounts.

\*GOVERNMENT MANDATED NOTICE: Virginia law requires political committees to report the name, mailing address, occupation and employer name & address for individuals whose contributions aggregate in excess of \$100 in a calendar year.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (home) \_\_\_\_\_ PHONE (work) \_\_\_\_\_

E-MAIL: \_\_\_\_\_

EMPLOYER \*: \_\_\_\_\_

EMPLOYER ADDRESS \*: \_\_\_\_\_

OCCUPATION \*: \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> \$10000 Chairman's Club                            | <input type="checkbox"/> \$5000 Torch Club   |
| <input type="checkbox"/> \$2000 Benefactor Life (nat'l & VA)                | <input type="checkbox"/> \$1000 Virginia Patriot   |
| <input type="checkbox"/> \$500 Patron of Liberty                            | <input type="checkbox"/> \$250 Freedom Club  |
| <input type="checkbox"/> \$100 Minuteman<br>(3 years VA plus 1 yr national) | <input type="checkbox"/> \$50 Sustaining<br>(1 year VA plus 1 yr national)               |
| <input type="checkbox"/> \$25 LPVA only                                     | <input type="checkbox"/> \$25 National only  |
| <input type="checkbox"/> \$5 STUDENT rate, Virginia LP only                 | <input type="checkbox"/> \$30 STUDENT rate, Sustaining Membership, Virginia and National |

Additional donation to the Virginia LP: \_\_\_\_\_

Additional donation for my county or city chapter: \$ \_\_\_\_\_

TOTAL ENCLOSED: \$ \_\_\_\_\_

Cash       Gold or silver       Check or Money Order (payable to the Libertarian Party)

Visa / MasterCard / Discover):

Card # \_\_\_\_\_

Expiration: \_\_\_\_\_ / \_\_\_\_\_ 3-digit security code \_\_\_\_\_

Signature: \_\_\_\_\_

----- Send this form with payment to: -----

**Membership Committee  
PO Box 28263  
Lakeside VA 23228-0263**

*If paying by credit card, you may fax this form to 804-288-2766.*

**CHOOSE YOUR SUPPORT LEVEL**