



**ROCKY MOUNTAIN IRISH WOLFHOUND ASSOCIATION**

[www.RMIWA.org](http://www.RMIWA.org)

**MEMBERSHIP RENEWAL DUES NOTICE – Calendar year 2023**

(If your membership application was read at the September or November General Membership meetings you do not need to pay dues for 2023)

NAME(S) \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
2<sup>ND</sup> Email Address: \_\_\_\_\_

STREET \_\_\_\_\_

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

TELEPHONE (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_  
(2<sup>nd</sup> Cell) \_\_\_\_\_

HOW DO YOU WISH TO RECEIVE THE CLUB NEWSLETTER? (pick one only):  
E-mailed directly to you \_\_\_\_\_ Paper copy mailed by post \_\_\_\_\_

Membership type \_\_\_\_\_ Dues included \$ \_\_\_\_\_

**Associate (Non-Voting)** \$20.00 Open to one or two persons eighteen years of age and older who may not vote nor count in the determination of a quorum, pay a reduced rate of dues and are not eligible to hold office. Associate members are eligible for all other privileges of the RMIWA including but not limited to annual awards and committee membership

**Active Single (Voting)** \$25.00 Open to one person eighteen years of age and older who shall have a single vote at all Association meetings and be eligible to hold office Shall attend a minimum of two (2) Association Meetings per Association year.

**Active Family (Voting)** \$30.00 Open to two persons eighteen years of age and older who shall have a single vote per individual in this unit at all Association meetings and be eligible to hold office. Shall attend a minimum of two (2) Association Meetings per Association year.

**Youth (Non-Voting)** \$5.00 Open to one or more persons between ten (10) and eighteen (18) years of age who are from the same family.

**Life (Non-Voting)** No dues Open to longtime members who have made significant contributions to the RMIWA, as approved by the RMIWA Board

**PayPal** payments accepted. Please add \$2 to the total dues and send to [Treasurer@rmiwa.org](mailto:Treasurer@rmiwa.org)

**Optional Donations:**

**HERO (Health, Education & Rescue) Donation** \$ \_\_\_\_\_ RMIWA General Fund Donation \$ \_\_\_\_\_

If you are also including an optional donation to HERO and/or the General Fund please note the amount on your check to the RMIWA.

**Make check payable to RMIWA. Mail Renewal Forms to: Michael Hussey VP/Membership Chair, 36895 View Ridge Dr., Elizabeth, CO 80107**

Renewals **MUST** be delivered to Michael Hussey in person or at the above address in order to be accepted.

**ADDITIONAL INFORMATION:**

Welfare: I will accept a homeless IW under certain conditions \_\_\_\_\_. Please send an application form \_\_\_\_\_.

Number of IWs currently owned: \_\_\_\_\_

News about you and/or your IWs:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REMINDER:** *Don't forget to send your 2022 Title information to Sarah Shorey! See enclosed TITLES sheet.*