



Conservative Patriots of Orange County

2024 MEMBERSHIP APPLICATION

The amount of the dues for all classes of membership shall be set by the Board of Directors. The fiscal year shall be the calendar year from January 1 through December 31. Dues for new members accepted into membership after Sept. 1 shall be credited to the following year.

1 year Membership: Single ___ \$30 Couple ___ \$50

2 year Membership: Single ___ \$50 Couple ___ \$90

I would like the newsletter emailed to me _____

I would like the newsletter mailed to me at \$25 additional cost to cover printing and postage _____

NAME (as you want it to appear in the roster)

Last Name First Name Initial (Optional)

BIRTHDATE (Month/Day) _____ **EMAIL*** _____

NAME (second name for couples only)

Last Name First Name Initial (Optional)

BIRTHDATE (Month/Day) _____ **EMAIL*** _____

ADDRESS _____

CITY _____ **ZIP** _____

HOME PHONE (_____) _____ **CELL PHONE** (_____) _____

** It is important that we have your e-mail address. There are times when critical information must be sent to our members ASAP. Your e-mail address will be used ONLY for CPOC purposes.*

Please tell your fellow patriot friends that they can also join CPOC online at:

www.conservativepatriotsofoc.org

I am a registered voter as:

Republican ___ Independent ___ Libertarian ___ No Party Preference ___

___ I uphold the values and principles of our country's founding documents. I believe the Constitution should be revered and upheld. I believe that individual liberty should be cherished and maximized. I also believe in limited government, local control, sound money management and free enterprise.

Applicant's Signature _____ **Date** _____

Make checks payable to CPOC
Send to: Michele Markel
1967 N. Lindenholtz St.
Orange, CA 92865

If you would like to make an additional donation to
CPOC please list amount below and include in your
membership check:

Donation: _____

**THANK YOU FOR YOUR MEMBERSHIP IN
CONSERVATIVE PATRIOTS OF ORANGE COUNTY**