

# MEMBERSHIP APPLICATION FORM

LEGISLATOR

American  
Legislative  
Exchange  
Council

2900 Crystal Drive, Suite 600  
Arlington, VA 22202  
TEL 703.373.0933 • FAX 703.373.0927  
www.alec.org

MR.                       MRS.                       Ms.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

SENATOR                       DELEGATE                       REPRESENTATIVE

Party Affiliation: \_\_\_\_\_ District Number: \_\_\_\_\_

Leadership Positions: \_\_\_\_\_ Committee Assignments: \_\_\_\_\_

## CONTACT INFORMATION:

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

MAILING ADDRESS 1:                       HOME                       BUSINESS

Street Address: \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

MAILING ADDRESS 2:                      LEGISLATIVE OFFICE

Street Address: \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

## PLEASE SELECT THE TASK FORCE(S) YOU WOULD LIKE TO JOIN. NUMBER YOUR TOP THREE CHOICES:

- |   |   |
|---|---|
| <input type="checkbox"/> Civil Justice                                | <input type="checkbox"/> Energy, Environment and Agriculture    |
| <input type="checkbox"/> Commerce, Insurance and Economic Development | <input type="checkbox"/> Health and Human Services              |
| <input type="checkbox"/> Communications and Technology                | <input type="checkbox"/> International Relations and Federalism |
| <input type="checkbox"/> Criminal Justice Reform                      | <input type="checkbox"/> Tax and Fiscal Policy                  |
| <input type="checkbox"/> Education and Workforce Development          | <input type="checkbox"/> Homeland Security                      |

## METHOD OF PAYMENT:

CARD:                                                                     

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ / \_\_\_\_\_ CVC: \_\_\_\_\_


Name as it appears on card: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CHECK: Included (\$100.00 for a two-year membership)

**PLEASE EMAIL, FAX OR MAIL TO:** American Legislative Exchange Council

**ATTN:** Membership

 **Email:** membership@alec.org                       **Fax:** 703.373.0927

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