



ERA Minnesota Application for Membership

Mail your Membership to:

Minnesota NOW
PO Box 912
Burnsville, MN 55337

Check payable to: **Minnesota NOW**
In the "Memo" line write: **ERA MN**
(or we won't get it)

Contact: Heather Allison, President: Heather@eramn.org

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell Phone: _____

Email: _____

Please indicate your interests based on skill sets you can contribute to the success of ERAMN:

- | | |
|--|--|
| <input type="checkbox"/> Volunteering | <input type="checkbox"/> Individual Membership |
| <input type="checkbox"/> Events, parades | <input type="checkbox"/> Organization Membership |
| <input type="checkbox"/> Information | |

New Membership

Renewal Membership

Membership One Year Fee:

- | | |
|--|--|
| <input type="checkbox"/> Regular \$20.00 | <input type="checkbox"/> Sliding Fee \$6.00 - \$19.00----- Membership \$ _____
(Minimum of \$6.00 required) |
|--|--|

- ERA MN T-Shirt \$32.00 (including S&H): ----- T-Shirt \$ _____
T-Shirt Size -Circle one: (Small) (Medium) (Large) (X-Large) (XX-Large +\$3) (XXX-Large +\$3)

- Donation----- \$ _____

Total Enclosed: \$ _____

Suggestions how you can Help us Win:

- Help Research organizational support ● Host a coffee or event to educate your friends and family
- Help ERA MN events ● Write letters to elected officials ● Write editorials ● Do Visibility ● Spread the word via Social Media ● Activate your friends ● Lobby the legislature ●
- Anything you can think of to help! ●