

**WASHINGTON COUNTY RIGHT TO LIFE
Membership Form**

Name _____

Address _____

Phone (Home) _____

Church Affiliation (Optional) _____

I wish to support WCRTL in the following way(s):

- Regular Member (\$10 donation) Student (\$5 donation)
- Billboards
- Marcolian Ad Marietta College Newspaper
- Other (Please Specify) _____

I would be interested in helping in the following activities:

- Education Finance Church Liaison
- Public Relations Other _____

We are sorry the IRS will not allow this charitable gift as a tax deduction.

Detach and return to: **WCRTL, PO Box 251, Marietta, Ohio 45750**
or call (740) 376-0200 for more information.

OUR GOALS

- ☞ To save innocent life**
- ☞ To restore the right to life to the unborn, handicapped and elderly**
- ☞ To help women experiencing crisis pregnancies**
- ☞ To educate people about life issues**
- ☞ To use nonviolent means to enact pro-life legislation and do away with pro-abortion legislation**
- ☞ To build a membership that supports pro-life education and activities**

This requires time, money and commitment from people like you!
Thank you for your support of Washington County Right to Life.