## WATSONVILLE - SANTA CRUZ JACL MEMBERSHIP FORM National Japanese American Citizens League (JACL) 2025 Membership Dues

Working toward our national goal of Better Americans in a Greater America is a worthy one. One does not have to be of Japanese ancestry to be a JACL member, but one must believe that safeguarding the rights of all Americans and legal residents is of utmost importance in this country.

Please join us today. We are the most proactive, oldest, and respected Asian American civil rights organization, and our programs include cultural appreciation and educational outreach.

Your membership is never taken lightly or for granted. We have worked diligently to earn your confidence and trust. Your active participation and membership can make a significant difference in what happens today in our community and in our nation.

Please help us fight racial prejudice, discrimination, racial profiling, bigotry, intolerance and indifference.

The 2025 National and local dues for our tax-deductible organization (ID #94-2659895) are as follows: With membership, a digital Pacific Citizen is included with email address. Subscription for a printed copy of the Pacific Citizen (PC) is an additional surcharge of \$17 a year, payable to National JACL, 1765 Sutter St, San Francisco, CA 94115.

Individual Memb	pership:		
\$85	Includes National JACL annua	l dues, Watsonville-Santa Cruz JACL cha	oter dues, and our newsletter.
Family/Couples	:		
\$155	Includes two National JACL annual dues, Watsonville-Santa Cruz JACL chapter dues, and our newsletters. It also includes all children under the age of 14.		
Youth/Student:			
\$30	•	14 to 24, includes National JACL annual c cific Citizen. <b>Youth membership is requi</b>	
Pacific Citizen (	paper copy)		
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Ψ''	The Facility of the Company of the C	y. (The digital copy is included with each	memberemp.)
		, <b>Silver, Gold and Platinum</b> ) and for Nati leases contact the National JACL at <u>jacl.</u>	
Name:			
	Last Name	First Name	Middle Name
Spouse's Name:			
	Last Name	First Name	Middle Name
		Email:	
		ages of all children under the age of 14:	
	Name:		Age:
	Name:		Age:
Address:			
	Street	Citv	State Zip

We would be honored to have you and your family members join our W-SC JACL Chapter. Please consider giving "gift" memberships to members of your family.