

TO:	Individual Members,	Zone
FROM:		Zone President
DATE:	August 2025	
RE:	2025 INDIVIDUAL MEMBERSHIP REPORT	

PLEASE COMPLETE THE INFORMATION PROMPTLY AND RETURN IT TO ME NO LATER THAN OCTOBER 20, 2025.

- 1. Complete the 2026 Individual Membership Report, printing clearly or typing. Complete entire page and return to me. I will send the form (including check) to the Vice President of Organizational Resources (she separates it and sends to the appropriate personnel).
- 2. If you do not have an email address, you are strongly encouraged to recruit someone in your church or family who is willing to receive email messages on your behalf and relay them to you. Please list this person's email address as your own on the attached form.
- 3. All *Quarterly* subscriptions must be renewed annually using the Individual Membership Report form. This applies to all Individual Members (new AND continuing).
- 4. Indicate the quantity of subscriptions you want at a cost of \$7.50 each. Subscriptions will only be activated after payment is received. Subscription quantities can be increased at any time throughout the year by contacting the *Quarterly* Coordinator at *financialsecretary@lwmltxdist.org*. (If you aren't ordering the *Quarterly*, you are missing an excellent publication. If you always order the *Quarterly*, consider ordering extra copies for other women in your congregation. It will be the best gift you could give them.)
- 5. Consider making a donation to offset the cost of publishing the *District News* section of *The Lutheran Witness*. Indicate the amount you are submitting. The cost to the LWML Texas District is approximately \$1 per member each year. We can avoid using mite money for this if we all pitch in.
- 6. One check may be used when payment is made for both the *District News* donation and the *Quarterly* subscription(s). Checks should be made payable to LWML Texas District and should be submitted with this 2025 Individual Membership Report to me before October 20, 2025.
- 7. Sign the report.
- 8. Make a copy of the report for your files and send the report and payment to me. My contact information is:

ZP Name address

Thank you for your cooperation in completing this form and for sending it, along with payment, to me by the deadline of October 20, 2025.