



Affiliation Membership

An Affiliate of the Right to Life Action Coalition of Ohio (RTLACO) is any Pro-Life unincorporated or incorporated non-profit organization approved for affiliation by the RTLACO Board of Directors.

RTLACO affiliation is not an exclusive membership.

Affiliates may be affiliated with other Pro-Life Organizations.

Annual Affiliate Membership fees

Mailing list greater than 650 is \$200.00. Mailing list of 150-650 is \$100.00.

Auxiliary Membership is \$50.00 for mailing list of less than 150.

Membership Requirements

Affiliates must

Fundamentally Agree with the RTLACO Policy Statement & Statement of Faith

Submit an Annual Membership Form and appropriate membership fee

Comply with the Laws of the State of Ohio

Assign one Director from each Member Organization with a mailing list of 150

Assign one additional Director for each additional 500 names

Number of Directors from any Member Organization is limited to 10

Each Director of a Member Organization has One Vote

Auxiliary Member Organizations have one Director without voting privileges

Benefits of Membership

RTLACO regularly communicates progress on

Legislative Strategies, Projects and News of Interest

RTLACO assists Affiliates with Organizational Needs

Board Structure, Sample Bylaws, Insurance Coverage for Events,

Issues Information Requests, Legal Information, Websites,

Candidate Surveys, Ballot Cards, and much more

Affiliates may use RTLACO affiliate Logo on print and online media

Voter Voice access

Disassociation

The RTLACO Board of Directors reserves the right to remove from affiliation any organization that may distance itself from RTLACO goals and objectives,

malign board members or other affiliates, seek to undermine

RTLACO legislative strategies and projects, or engage in unlawful,

uncharitable, or unscrupulous activities.



Affiliate Annual Membership Form

We fundamentally agree with the RTLACO Policy Statement
and the Statement of Faith: Yes No

Organization Name: _____
 Incorporated Unincorporated 501(c) (3) 501(c) (4)

Contact Name & Title: _____

Organization Address: _____ County _____

Cell Phone: _____ Home Phone: _____

Email: _____ Fax: _____

Do you have a direct-mailing list of 150 or more? Yes No

Please indicate estimated size of mailing list: _____

Officers and Board Members roster attached

Please mail this completed membership form, documents and membership fee to

**Right to Life Action Coalition of Ohio
P.O. Box 338
Madison, OH 44057**