



Personal Information – As Registered to Vote

First Name: _____ Last Name: _____

Date of Birth ____/____/____ Occupation: _____

Address: _____ City: _____ Zip: _____

Phone Number: Home Mobile _____

Email Address: _____

Membership Interest

- | | | |
|--|--|---|
| <input type="checkbox"/> Voter Registration | <input type="checkbox"/> Fundraising Event Volunteer | <input type="checkbox"/> Issue Advocacy |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Candidate Recruitment/Development | <input type="checkbox"/> Event Planning |
| <input type="checkbox"/> Website Maintenance | <input type="checkbox"/> Membership Recruitment | <input type="checkbox"/> Other |

If other, please describe: _____

Membership Dues

- | | | |
|---|--|-------------------------------------|
| <input type="checkbox"/> \$20 Yearly Dues | <input type="checkbox"/> Additional Donation \$_____ | <input type="checkbox"/> Fee Waiver |
|---|--|-------------------------------------|

Affirmation

- Yes, I affirm that I am a registered Democrat.
 Yes, I affirm that I will register to vote as a Democrat once eligible to vote.

Signature: _____ Date: _____

**You may mail this application to:
Three Rivers Democratic Club
P.O. Box 1240 Three Rivers CA 93271
You may also deliver in person at our monthly meeting.**

**The Three Rivers Democratic Club meets monthly
6:30PM Member Meeting begins – Day & Location to be determined**

FOR TCDCC USE

- Secretary / Director of Membership
BOS _____ AD _____ SD _____ CD _____
 Email added to distribution list Member added to roster
 Treasurer: Dues paid Waive