



Date _____

New Renewal

MEMBERSHIP APPLICATION – MUST BE REGISTERED DEMOCRAT

Name _____ Voter Precinct _____ Reg# _____

Email _____

Polk County Address _____ Phone _____

City _____ Zip _____ DOB (Young Adults only) _____

(If Associate member) Permanent Address _____

City _____ State _____ Zip _____

I support and adhere to the principles of the Democratic Party and wish to become a member of the Greater Winter Haven Democratic Club. (GWHDC)

Signature _____

All Dues cover January-December. Dues paid between Oct 1st-Dec 31st will also cover the next year.
Associate Members are part-year residents who are registered Democrats outside of Polk County and have limited membership (cannot hold office or vote).
Young Adult Members are registered Polk County Democrats 18-25 years old with full membership.

Send completed application to:
greaterwinterhavendems@gmail.com

To Pay by credit/debit card, Click on:
[GWHDC Membership Dues](#)

To pay by check, make payable and send to:
 The Greater Winter Haven Democratic Club
 c/o Todd Thompson, Treasurer
 1776 6th St NW #606, Winter Haven, FL 33881

Only checks are accepted by mail. Do not send cash.

Select Annual Membership & Payment Option

- Full Membership \$20.00 per year
- Associate Membership \$10.00 per year
- Young Adult Membership \$5.00 per year

Payment _____

Additional Donation _____

TOTAL PAYMENT \$ _____

All Donations are Appreciated

Cash, Check, Credit or Debit Card Accepted

Fee Will be Added @ credit/debit site of:

Full & Associate Members \$1.00; Young Adult \$.50

Credit/Debit Card Link:



[GWHDC Membership Dues](#)

Thank You and Welcome!