



MEMBERSHIP APPLICATION

* **required entries** please print clearly

* Name(s) _____

* Street Address _____

* City, State, Zip Code _____

Email (*personal*) _____ * Phone, C or H _____

* Occupation _____ * Employer _____
if 'retired', 'unemployed', or 'student' enter that for both occupation and employer

Interested in serving on a Committee (interests) _____

Membership Duties

“It shall be the duty of every local Committee, as well as each officer and member thereof, to seek the registration of voters, to perfect the Democratic organization within the county or city, and to do all within their power to aid in the victory of the Democratic Party’s nominees in all elections, except as otherwise provided in Section 10.9.” (Section 8.8)

“No Democratic Committee member or officer of any Democratic Committee shall publicly support, endorse or assist any candidate opposed to a Democratic nominee. In the event any Democratic committee member or officer of any Democratic Committee shall undertake such public activity, the appropriate Democratic committee shall remove said person from office. Such action shall not be taken without at least ten (10) days written notice to the accused member and an opportunity for him or her to refute such charges. In the event that no action is taken against such a person, the district committee shall initiate the necessary action. The Steering Committee may take further action within thirty (30) days after the receipt of a written complaint by any member of the Democratic Party in relation to such matters.” (Section 10.8)

I have read the section of the Party Plan printed above. I understand that as a Committee member I will support *all* nominees and endorsees of the Democratic Party and that I will not support a candidate opposed to a Democratic nominee or endorsee. I understand further that supporting the Party’s nominees and endorsees includes volunteering for such activities as precinct work and other committee activities.

My signature below indicates that: I have opted in to receive emails, calls to cell phone, SMS/txt messages from the Russell County Democratic Committee; that they are permitted to take photographs at events and publish them as appropriate without additional permission from those who may appear in the image. All member contact information is forwarded to the Democratic Party of Virginia.

Signature Required

* Signature _____ * Date _____

thank you for supporting the Democratic Party

Paid for by the Russell County Democratic Committee, Facebook.com/RussellCountyVADemocrats, not authorized by any candidate or candidate’s committee.