



COMMUNITY DEMOCRATIC CLUB

164 Robles Way – Suite 135

Vallejo, CA 94591

www.communitydemocraticclub.com

MEMBERSHIP APPLICATION

NAME: _____ Adult Youth (16-17) _____
Check one Age

ADDRESS: _____

CITY: _____ ZIP: _____

TELEPHONE(S): _____

E-MAIL: _____

ADULT - I am submitting this application to join/renew membership in the Community Democratic Club. I am a registered Democrat over 17 years of age, and I am paying my dues from personal funds only.

YOUTH - I am submitting this application to join/renew membership in the Community Democratic Club. I am 16 or 17 years of age.

I authorize the Community Democratic Club to include my email address(es) on the club's mailing list. Note: club correspondence is conducted exclusively by electronic means. Members without email will not receive notice of club meetings or activities.

I authorize the Community Democratic Club to release my contact information to fellow club members for internal communications only. Club members are not authorized to release this information to non-members without my expressed permission.

DUES

_____ Amount Dues are \$10/calendar year for adults and there is no fee for youth 16-17 years of age. Dues are payable to Community Democratic Club and they are *not tax deductible*. Dues are used to support the operations of the club.

CONTRIBUTIONS

_____ Amount I wish to contribute \$_____ to the club's candidate fund. I understand that this money will be distributed in accordance with club policy and I may not designate its contribution to any particular candidate.

_____ Amount I wish to make a general contribution of \$_____ which may be used for any lawful purpose the club deems appropriate.

_____ Total Amount Paid

MAKE CHECK PAYABLE TO – Community Democratic Club and mail to address above

X _____ (signature)

(Office use only) Dues paid: _____ Check/Cash _____ Date _____