



P.O. Box 1145
Monroe, NY 10949

MEMBERSHIP APPLICATION

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____ Mobile: _____

E-Mail: _____

Occupation or Profession: _____

I am a registered Democrat in (name of town or city) _____

I am interested in working on one or more of the following committees:

Fundraising _____ Campaign _____ Membership _____

Public Relations _____ Legislative _____ Voter Registration _____

Candidate Endorsement _____ Youth Outreach _____

Other _____

I am available: Weekdays _____; Evenings _____; Weekends _____

Signature _____

MEMBERSHIP TYPE (please check one)

- Regular (Orange County Resident - \$20 annual dues
- Ex Officio (Non-resident) - \$20 annual dues
- Senior Citizen (age 60 and over) - \$15 annual dues
- Full-time College Student - \$15 annual dues
- Full-time High School Student - Free

New Member _____

Renewal _____

Please make your check payable to the Latino Committee of Orange County

Send completed application to:

Latino Democratic Committee of Orange County
P.O. Box 1145
Monroe, NY 10949