

PORT ORANGE DEMOCRATIC CLUB

P.O. Box 291982, Port Orange FL 32129. Phone: 386-320-9539
Email: podems@outlook.com. https://www.portorangedems.org
https://www.facebook.com/PODemsPage Twitter & Instagram: portorangedems



MEMBERSHIP APPLICATION

Membership expires December 31st



N=New. R=Renewal

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Secondary Address: _____

E-mail Address _____

Preferred Phone Contact: Home Cell Work _____ Text: Yes No

Secondary Phone Home Cell Work _____ Text: Yes No

Preferred Method of Contact: EMAIL TEXT PHONE

I am interested in becoming involved in the following areas (check all that are applicable):

- | | |
|--|---|
| <input type="checkbox"/> Campaign Activities | <input type="checkbox"/> Newsletter/Publicity |
| <input type="checkbox"/> Membership Activities (Recruitment) | <input type="checkbox"/> Finance/Fundraising |
| <input type="checkbox"/> Legislative Activities | <input type="checkbox"/> Social Media/Website |
| <input type="checkbox"/> Voter Registration | |
| <input type="checkbox"/> Other (Please specify) _____ | |

Membership Dues: \$25.00 per person (\$10 student with ID).

Make Checks Payable to: Port Orange Democratic Club

Mail to P.O. Box 291982 Port Orange, FL 32129

I am a Registered Democrat in Volusia County. Precinct # _____ (If you don't know, we can look it up)

Voter Registration# **OR** Date of Birth: _____

I certify that I am a REGISTERED DEMOCRAT and I am aware that my voter registration will be verified with the Volusia County Supervisor of Elections

Date Signature

***** CLUB USE ONLY *****

Paid: \$ _____ Cash Check # _____ Rec'd by: _____