

## MEMBERSHIP APPLICATION

	□ New Membe	rship   Rene	wal
Name:			
Address:			
City:		State:	Zip:
Email Address:			
Home Phone:	·	Cell Phone:	
Are you registered to v		□ No ation Form or visit http	os://georgia.gov/register-vote ).
•	ote at the above address are you registered to ve		No
license, even if expire photo ID from any bra county, municipality, military photo ID cont photograph of the vot	d; Student ID from a Gench, department, agenchoard, authority, or other aining a photograph of the cr.   Yes   I Yes	orgia public College of the U.Ser entity of the U.Ser entity of this state; the voter; Valid tribal	
of Driver Services). To document or approve birth; Documentation voter; Documentation	receive the voter identid non-photo identity do showing the voter's data showing the applicant VETA COUNTY VOTER REGIST	fication card, the vote cument that includes se of birth; Evidence t s name and resident	e or by the Georgia Departmen er must provide: A photo ident s full legal name and date of that the applicant is a registere ial address. PLEASE ALLOW AT LEAD PPLICATION BEFORE CONTACTING
	MEMB	ERSHIP TYPE	
	☐ Grassroots Supp	orter/Standard Meml	bership (\$20)
]	☐ Coweta Activist N	1embership (\$35)	
]	☐ Coweta Leader M	lembership (\$50)	
. [	☐ High School Stud	lent Membership (\$1	0)
	□ Undergraduate S	tudent Membership (	(\$15)
. [	☐ Additional Contri	bution and Designati	ion <u>(\$</u> ) for
	¢	TO	TAL AMOUNT DUE



## DEMOCRATIC PARTY AFFIRMATION STATEMENT

Form must be completed in its entirety and be submitted to the Coweta County Democratic Party