



Printable Membership Form

Be a part of the Solution - Join the Santa Rosa Democratic Club

NOTE: The information you provide on this form will be used for Santa Rosa Democratic Club's administrative purposes only. Our mailing list will not be published or shared with any other organization or company.

Membership Level:

- \$25/year Individual \$35/year Household (2 or more people at one address)

Status:

- Renewing Member New Member

*Make your check payable to **Santa Rosa Democratic Club**. Please write "Membership" on the check's reference line. Thank you. You must be a registered Democrat to be a member.*

Please print clearly.

Name : _____

Mailing address: _____

Residence address (if different): _____

City, State & Zip: _____

(Mailing address)

(Residence Address if different)

Phone: _____

(Landline)

(Mobile)

Email: _____

If retired, check this box

If employed, complete below:

Occupation: _____ Employer: _____

Mail this completed form and check to: Santa Rosa Democratic Club, P. O. Box 32, Santa Rosa, CA 95402