

# RAPPAHANNOCK COUNTY DEMOCRATIC COMMITTEE

## Application for Membership

2020-2021

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: *Virginia* Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

I, \_\_\_\_\_, declare my candidacy for membership in the Rappahannock County Democratic Committee, and represent as follows:

1. I am a bona fide resident of Rappahannock County, and I am registered to vote in the \_\_\_\_\_precinct.
2. I am obligating myself to support the Democratic Party of Virginia and the Rappahannock County Democratic Committee, and to adhere to the Bylaws of the RCDC.
3. I will participate in political activities of the RCDC, attend the regularly scheduled meetings, and I will word for the RCDC in those ways that best suit my abilities.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

*Please return this application to:  
Rappahannock County Democratic Committee  
P.O. Box 277, Washington VA 22749*