

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 work 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*