



DOUGLAS COUNTY  
**Democratic Women**  
 MAKING A DIFFERENCE IN OUR COMMUNITY

## Membership Application

**MISSION:** To promote social and economic security, equality, justice, and opportunity for all.

**PURPOSE:** To be an effective action forum supporting those candidates and issues DCDW endorses. To provide grassroots input into the political process by identifying and promoting local, regional, state, and state, and national political issues and positions endorsed by DCDW.

- I am a renewing member  
 My information has changed – see below
- I am a NEW member or returning member

**NAME:** FIRST: \_\_\_\_\_ M.I. \_\_\_\_ LAST: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: HM: \_\_\_\_\_ WK: \_\_\_\_\_ Mobile: \_\_\_\_\_

PLEASE INDICATE YOUR PHONE CONTACT PREFERENCE: \_\_\_HOME \_\_\_WORK \_\_\_CELL/MOBILE

EMAIL: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ (If retired, please indicate from what.)

Talents/Skills to share: \_\_\_\_\_

What do you hope DCDW will provide you as a member? \_\_\_\_\_

**VOTING MEMBERSHIP ANNUAL DUES**

**\$40 – Standard membership    \$55 – Supporter**  
**\$100 – Sustainer    \$15 – Living Lightly    \$ \_\_\_\_\_ Other**

With a minimum payment of \$55 you can receive a free DCDW Membership pin - indicate here \_\_\_ if you would like the pin. Serving on a committee is the lifeblood of our organization; we need your talents and skills. Please circle your preference(s):

Fundraising                      Public Relations                      Legislation                      Programs  
 Membership                      Scholarship                      Community Service

**WE RESPECT YOUR PRIVACY**

Please indicate what personal information you'd prefer NOT to share on the DCDW membership roster (available to all members) by checking the chosen options below:

- NAME                       ADDRESS                       EMAIL                       TELEPHONE

Complete and return this form with your payment to:

Douglas County Democratic Women (DCDW)  
 P.O. Box 939, Minden, NV 89423

**FOR OFFICE USE ONLY**

DATE REC'VD: \_\_\_\_/\_\_\_\_/\_\_\_\_ CASH: \_\_\_\_\_ OR CHECK #: \_\_\_\_\_ AMOUNT: \_\_\_\_\_ PRECINCT #: \_\_\_\_\_