

**MEMBERSHIP APPLICATION**

**YEAR:** \_\_\_\_\_

*Please Print*

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

**Address:** \_\_\_\_\_

**City:** Portsmouth    **State:** VA    **Zip:** \_\_\_\_\_    **Email:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_    **Business Phone:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_    **Other:** \_\_\_\_\_

By my application for membership in *The Portsmouth Democratic Committee*, I commit myself to support the Democratic Party of Virginia, and *The Portsmouth Democratic Committee*, in the following ways:

1. By regularly attending meetings of The Portsmouth Democratic Committee;
2. By assisting and supporting Democratic candidates and their issues;
3. By adhering to the by-laws of the Portsmouth Democratic Committee and the Virginia Democratic Party;
4. By offering Democratic leadership in the community and by voting for Democratic candidates and initiatives and by encouraging the support for these by my family, friends, and neighbors.

I certify that I am duty registered voter in the City of Portsmouth in Precinct \_\_\_\_\_ and that I will not oppose any candidate who is nominated or endorsed by the Portsmouth Democratic Committee or by the Democratic Party of Virginia during my term of membership. I understand that dues for membership are Fifteen Dollars (\$15.00) per year. Family Memberships are Twenty-Five Dollars (\$25.00) annually.

I further understand that if I am not reasonably able to pay these dues, they may be waived by application to the Chair.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

FOR USE BY THE SECRETARY OF THE PDC

Admitted to Membership: \_\_\_\_\_

\_\_\_\_\_ Chair's Initials