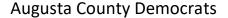
Application for Membership & Dues





Name:	
	Please Print
Address:	
Home Phone:	Cell Phone:
E-Mail address you want us to use:	
Date: Applican	t's Signature
DUES: The Augusta County Democratic activities of the Committee in the amount	Committee suggests voluntary annual dues to support the work and of:
	\$30.00 Single
Made Charle Barelala Area de Carel	\$10.00 Student
Make Checks Payable to Augusta County	Democrats
Submit Application and Dues to:	Augusta County Democratic Committee
	P.O. Box 593
	Fishersville, VA 22939
Or Contribute online at ActBlue: http://s	ecure.actblue.com/contribute/page/augustavadems
In addition, to my dues, I am making an a	additional contribution, for a total of \$
•	used to advance the party's primary goals of electing Democrats to

All monies collected by the Committee is used to advance the party's primary goals of electing Democrats to office to represent us in local, state and federal government. Examples of expenditures include: headquarters rent, insurance and WIFI, and mailing expenses, supplies for campaign activities, Get Out the Vote (GOTV) and voter registration, and reserving facilities for events.

PLEASE NOTE: An electronic version of our Membership form and a DONATE button for payment of dues may be accessed on our website at https://www.sawdemocrats.com/get-involved-augusta. You can download or print our Membership form and the completed form may be emailed to augustacodemocrats@gmail.com Receipt of such email will be considered a signed document. The DONATE button will direct you to our ActBlue account.