



Democrats of Napa Valley PO Box 206 Napa, CA 94559

	DEMOCRATS OF NAPA VALLEY CLUB	
DATE:	Membership Application	

Me	mbership Classifications:			
	Individual		\$25	
	Household (limited to 3 voting members)		\$40	
	Please add \$10 for ea. additional vo (pursuant to the Democrats of Napo	iting member over 3 from this hou a Valley bylaws)	sehold \$	
	Senior (over age 60)		\$20	
	Veteran (US Armed Services)		\$15	
	Student (full time)		\$10	
Total Amount of Membership Dues \$				
Wo	uld you like to make an additional donation	n to support our activities?	\$	
Tot	al Amount		\$	
Your	Information:			
Name	es(s):			
	t Address:			
	Phone:			
	il:			
E-ma	il 2:			
The f	ollowing information is required by law.	(If you are not employed, please	enter "none".)	
	pation:			
	oyer:			
	Signature:			
Tour	signature:	Date signea:		
By sig	gning above, I am confirming that these n or corporation. I understand that polit	dues and donations are from my ical dues and donations are not	r personal funds, not from a tax-deductible under federal law.	
<u> </u>	interested in: Volunteering n-kind donations			
Pleas	e mail this form with your check payable	e to:	Democrats of Napa Valley	
			PO Box 206	
			Napa, CA 94559	
*Or, if	ineligible to vote due to current legal impediment, I p			
		Contact us at: napavalleydems1@gn	nail.com	
Date I	Received: Paid By: I	Method of Payment: If F	aid By Check, Check#:	