DEMOCRATIC WOMEN OF LINCOLN COUNTY

Post Office Box 102, Lincolnton, N. C. 28093

MEMBERSHIP FORM- 2023

Name _____

Current or Last Occupation / Job Title_____
Specific Field or Current / Last Employer's Name _____
If retired, listing your former occupation is required by Campaign Finance Laws.

Mailing Address _____
_____

Email _____
Phone Numbers: Home - _____Work:_____
Cell - _____

Contact preferences for announcements, updates, meeting reminders, etc.
(You may choose more than one method.)
____Email ____Phone Call ____Text messages

Dues - $10.00 – January – December 2023
Attached:
Dues - $_____ Get Out The Vote Fund- $_____ Scholarship $_____
Total = _____ (Check #_____) (Cash $_____)

Volunteer Interests: (Please check preferences)

____ Registration Drives
____ Clerical/Office
____ Food
____ Serve on Committees
____ Other _____
____ Fund Raising
____ Phone Calls
____ Special Events
____ As Needed

Please indicate your top priorities on current issues:

_____ Redistricting
_____ Voter Registration
_____ Social Security
_____ Infrastructure Issues
_____ Environmental Issues
_____ Education
_____ Medicare
_____ Foreign Policy
_____ Affordable Care Act
_____ Drug Treatment/Policy
_____ Immigration Reform
_____ Second Amendment