

## **Minorities in Politics**

P.O Box 41591 Raleigh, NC 27629 www.minoritiesinpolitics.org

ou must be a registered Democrat to apply for membership, please print	Date	Date	
ame*	Female Male		
ddress*			
ity*	State*	Zip*	
ome Phone Work Phone	Cell Phone		
mail			
ccupation* retired, print retired			
mployer*			
retired, print and list former employer			
recinct NC House District	NC Senate District		
1. Membership/Type of Payment New Member	RenewalChe	eck Cash	
2. Membership Level Basic (\$35.00) College Student (\$	\$17.50)		
Make check payable to: Minorities in Politics and mail to: PO	. Box 41591, Raleigh, NO	27629	
3. Are you an elected official or Democratic Party Officer?	Yes No		
if yes, what position do you hold?  (NDCP, WCDP, President Officer, City Council member, County)	y Commissioner, NC Legisl	ator, Judge)	
4. What are your areas of interest?			
Membership- Recruiting/Renewals	Social Events- Evenings		
Hospitality/Hostesses- Organization Events	Programs		
Luncheon/Dinner Chair- Planning/Operations	Volunteering- Phone/Mailings		

Thank you for joining Minorities in Politics

<sup>\*</sup>Items marked with an asterisk are required by the state law, Please provide all information to help us serve you and our party.