

PICKENS COUNTY REPUBLICAN PARTY MEMBERSHIP APPLICATION FORM

For the period of: 1/1/1: - 12/31/1:

Legal Name:

Current Legal Address:

City, State, Zip:

Mailing Address if different:

Voting Precinct:

Email:

Phone [H]:

Employer [required by the FEC]:

I declare that I am a legal and qualified voter residing within Pickens County, Georgia and that I believe in the principles of the Republican Party and support its aims and purposes.

Applicant's Signature: _____

Date: _____

{Additional Signatures for Family & higher memberships}

Applicant's Signature: _____

Date: _____

Applicant's Signature: _____

Date: _____

MEMBERSHIP TYPE

Regular **\$15** _____

Family **\$25** _____

Silver **\$120** _____

Gold **\$180** _____

Platinum **\$250** _____

Other [_____]

Donation \$ _____ I do not wish to become a member at this time.

COMMITTEE[S] OF INTEREST

Please check the committee[s] of interest to you:

Membership: Finance & Fund raising Newsletter Telephone Events
 Public Relations Candidate Recruitment Precinct Development Rules
 Web site Young Republicans Serve on Executive Committtee

PLEASE MAKE CHECKS PAYABLE TO: Pickens County Republicans

**MAIL TO: 744 Noah Drive, Ste. 113 #135
Jasper, GA 30143**

If you have questions, please feel free to send an e-mail to pickensgagop@gmail.com