



# Pickens County Republican Party Membership Application Form

For the period from 01-Jan-2020 through 31-Dec-2020

Legal Name:

Current Legal Address:

City, State, Zip:

Mailing Address if Different:

Voting Precinct:

Employer (Required by FEC):

Email:

Phone:

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:

Applicant's Signature:

Date:

Applicant's Signature:

Date:

(Additional Signatures for Family and higher memberships)

### Membership Type (please choose)

Regular (\$15)

Family (\$25)

Student (18-and-under only)  
(\$10)

Donation \$

I do not wish to become a member at this time.

### Committee(s) of Interest (please choose)

Membership  Finance & Fund Raising  Phone Calls  Events  
 Precinct Development  Canvassing

PLEASE MAKE CHECKS PAYABLE TO : Pickens County Republicans

MAIL TO: 744 Noah Drive, Suite 113, PO Box 135, Jasper, GA 30143

If you have questions, please feel free to send an email to [info@pickensgop.org](mailto:info@pickensgop.org)

