



**BRUNSWICK COUNTY DEMOCRATIC WOMEN
MEMBERSHIP FORM**

Kindly PRINT all information

NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE _____ ZIPCODE _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL: _____

OCCUPATION * : _____

EMPLOYER * : _____

REGISTERED DEMOCRAT? YES / NO PRECINCT: _____

AREAS OF INTEREST / EXPERTISE: _____

INTEREST IN HOLDING OFFICE: BCDW OR ELECTED OFFICIAL

SIGNATURE: _____

** NC State Board of Elections requires us to collect information noted with * . If you are retired, please enter "Not Employed" in Occupation and Employer.*

MAIL THIS FORM AND PERSONAL CHECK FOR \$25 PAYABLE TO BCDW TO:**

**BCDP -- Attention BCDW Treasurer
PO Box 503
Supply NC 28462**

***Electronic payments may also be submitted to BCDW using your personal Zelle account. Please direct your payment to BCDWtreasurer@gmail.com, then follow-up with an electronic copy of your completed registration form sent directly to the Treasurer at the same email address.*

BCDW Meetings are held monthly at noon on the 3rd Thursday at party headquarters

:

***1420 Old Ocean Hwy
Bolivia, NC 28422***