

BRUNSWICK COUNTY DEMOCRATIC WOMEN

MEMBERSHIP FORM 2024

NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE _____ ZIP CODE _____

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: _____ DATE: _____

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

SUBMIT THIS FORM, ALONG WITH CASH OR PERSONAL CHECK FOR \$25 PAYABLE TO BCDW. YOU MAY BRING THE COMPLETED FORM AND YOUR PAYMENT TO A MEETING OR MAIL TO:**

Attn: BCDW Treasurer
P.O. 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 on the 3rd Thursday of at Noon at party headquarters : 1420 Old Ocean Hwy, Bolivia, NC 28422.