



DEMOCRATS OF THE RED ROCKS MEMBERSHIP APPLICATION

Date Submitted: _____

Check one:

- New member, welcome to DORR!
- Renewing member, your continued support and help is important.

Name _____

Address _____

City _____ Zip _____

Home Phone _____ Cell Phone _____

E-mail _____

For Family Memberships:

Household partner name _____

Household partner email _____

To comply with Federal Law, the following information is required:

Occupation _____ Employer _____

Partner's occupation _____ Employer _____

Please check the box(es) that apply:

- Individual annual membership \$ 30.00
- Family annual membership (2 voting members) \$ 50.00
- Donations (always welcome!) \$ _____
- Total Enclosed** \$ _____

WE NEED YOUR HELP!

- I'll help any way I can! Please call me.
- Voter contact/registration; canvassing; neighborhood program
- Write letters to the editor
- Help with technology; graphic design, web design and maintenance
- Staff the office
- Get involved in campaigns for candidates or issues; legislative advocacy
- Help develop programs and find speakers
- I am not able to work at this time. Call me later.
- Special skills: _____

Please send this completed form and your check, payable to DORR, to:
 DORR | PO Box 1165 | Sedona AZ 86339-1165