



Suffolk Democratic Committee

Declaration of Candidacy for Membership

I, _____ a resident of the precinct of _____

in the city of Suffolk, Virginia, declare myself to be a candidate for membership on the Suffolk Democratic Committee (SDC). I affirm that I am registered to vote in the precinct in which I reside and that I believe in the principles of the Democratic Party.

Mailing Address _____

Home Phone _____ Mobile Phone _____ Veteran? []

Signature _____ Date _____

Membership is subject to approval by the SDC membership committee and election by the Suffolk Democratic Committee. Your membership fee (\$25.00) must be submitted with this application. This form along with dues payment should be mailed to:

The Suffolk Democratic Committee
Post Office Box 3458
Suffolk, Virginia 23439-3458

Make checks payable to the Suffolk Democratic Committee.

All members, upon acceptance, are expected to serve on a specific committee within the SDC

Online applications can be found at the SDC Website <http://www.suffolkian.com/sdc>

if you have questions, please e-mail us at: sdcvirginia@sdcvirginia.org

FOR MEMBERSHIP COMMITTEE USE ONLY:

Application Approved []

Membership Type _____

Paid for and Authorized by the
Suffolk Democratic Committee, Virginia