

State Tejano Democrats

2024-2025 Membership At-Large Application Form

MEMBERSHIP STATUS	At-Large	No Affiliation	
Tejano Chapter Name:			
Senate District:	 	County:	
PERSONAL INFORMATION Name:			· · · · · · · · · · · · · · · · · · ·
Date of Birth:	V	oter Registration Numb	er:
Email:			
Home Address, City, State, Z	ip:		
Occupation:			occupation, title, and employer.
			· · · · · · · · · · · · · · · · · · ·
Employer/Company:			
from August 1 until July 31 of t	he following year. pay dues during Ju	The dues paid shall be appli ine and July of each year an	each year and the dues year shall be ed to the dues year during which they d have those dues apply to the - Section 3, State Tejano Bylaws)
SIGNATURE			
Applicant signature is require	d to join Tejano	Democrats.	
	Name		 Date