



# State Tejano Democrats

## 2020-2021 Membership Application Form

**MEMBERSHIP STATUS**     New     Renewal     At-Large     No Affiliation

Tejano Chapter Name: \_\_\_\_\_

Senate District: \_\_\_\_\_ County: \_\_\_\_\_

### PERSONAL INFORMATION

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Voter Registration Number: \_\_\_\_\_

Email: \_\_\_\_\_

Phone \_\_\_\_\_

Home Address, City, State, Zip: \_\_\_\_\_

Mailing Address, City, State, Zip: \_\_\_\_\_

### STATE DUES

State Dues are \$10.00. For donations over \$50.00, please list your occupation, title, and employer.

Occupation: \_\_\_\_\_

Title: \_\_\_\_\_

Employer/Company: \_\_\_\_\_

### SIGNATURE

Applicant signature is required to join Tejano Democrats.

\_\_\_\_\_

Name

\_\_\_\_\_

Date