

**Lake Highlands/White Rock Democrats
Membership Application**

Membership is based on a calendar year. Dues are \$30 for the first person and \$35 for the household. **PLEASE PRINT.**

Date: _____ Amount Paid: _____

First Member's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Preferred Phone Number: _____

Email: _____

*Occupation: _____

Second Member's Name: _____

Second Member's Phone: _____

Second Member's Email: _____

*Second Member's Occupation _____

Would You Like A Monthly Meeting Reminder Call? ____ Yes ____ No

Please Check If You Would Like To Volunteer For Any Of The Following

_____ For The Love Of The Lake _____ Telephone Committee

_____ Organizing Club Events _____ Social Media :

**Please make check payable to and mail to:
LHWR Democrats
P.O. Box 180598 Dallas, TX 75218-0598**

Or pay through PayPal: www.paypal.me/LHWRDemocrats

*Required for Texas Ethics Commission