

LA CROSSE COUNTY DEMOCRATIC PARTY
2010 MEMBERSHIP / DONATION FORM



WWW.LAXDEMS.COM

YES - Please enroll me, and/or my family, as a member of the La Crosse County Democratic Party for 2010. Enclosed is payment for dues according to type of membership requested.

Applicant Information (please print or type)

Name			
Address			
City			
State			
ZIP Code			
Telephone	Home: () -	Work: () -	
Fax			
E-Mail			
Occupation			
Assembly District	94th 95th	Ward	
I am interested in volunteering for Party activities.	YES NO		

Please CHECK A Dues Structure Below:

\$25.00	General	\$75.00	Family Membership
\$10.00	Senior Citizen, Student, or Unemployed	\$120.00	Supporter
\$35.00	Pairs (Includes 2 Memberships)	\$240.00	Friend
\$45.00	Activist (Up to 3 Memberships)	\$600.00	Patron
		\$1,200.00	Investor
		\$2,400.00	Benefactor

Additional Contribution to County Party	\$
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Total Amount Paid:	\$ Check		Cash
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Please Make Checks Payable To: La Crosse County Democratic Party

Please Mail To:

La Crosse County Democratic Party
 PO Box 1861
 La Crosse, WI 54602-1861

I RECOMMEND Contacting The Following Person As A Possible Member:

Name		
Phone	() -	