



Grand Traverse County Democratic Party Membership & Donation Form
Memberships \$25 & up can be joint membership, please fill in partner information

Date: _____

First Name: _____ Last Name: _____ Occupation*: _____

Address*: _____ City*: _____ State*: _____ Zip*: _____

Home phone: _____ Mobile phone: _____ Email: _____

Employer*: _____ Employer Address* _____ City _____ State _____ Zip _____

Partner Information For Joint Memberships only:

First Name: _____ Last Name _____ Occupation*: _____

Home phone: _____ Mobile phone: _____ Email: _____

Employer*: _____ Employer Address _____ City _____ State _____ Zip _____

Would you like to volunteer? _____

*We are required to obtain address, occupation and business address by Michigan campaign finance law. If retired or not employed, simply put "Not Employed" or "NE" in the Occupation field and ignore Business Address.

Membership levels for calendar year January 1 – December 31:

- Student \$0 Senior \$5 Supporter \$10 Silver \$25 Gold \$50 100 Club \$100
 FDR \$250 JFK \$500 Obama \$1000 Other Amount: _____ Donate Only - no membership

Please make checks payable to: GTCDC
Please do not send or enclose cash!

Payment by Credit Card is processed via Act Blue.

Name on Card: _____ Card Number: _____

Security Code: _____ Exp Date: _____ Amount: _____

I authorize the use of Act Blue to collect this Contribution, Signature: _____

Donations are **not** tax deductible. Your contribution may be used in connection with federal elections and is subject to the prohibitions and limitations of both the Federal Election Campaign Act and Michigan Campaign Finance Law. Both Federal and State law requires us to collect and report the name, mailing address, occupation and employer. **We cannot accept cash.**