



CHARLOTTE COUNTY DEMOCRATIC WOMENS CLUB  
MEMBERSHIP APPLICATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

\_\_\_\_\_ Please check the blank if you would like to receive the emailed newsletter from the Charlotte County Democrats.

I hereby certify that I am a registered Democrat.

Signature: \_\_\_\_\_

Mail this form with a \$28 check made payable to the CCDWC to Judith Orłowski, Democratic Women's Club Treasurer, 1181 Dewhurst St., Port Charlotte, FL 33952.