Constantined Con-		d County Republican CCRC Mailing Address: PO Box 4718 Midlothian, VA 23112 www.chesterfieldgop.com	(	Constantined Con-
Name		ee Membership Applic Prefer		
Address				
City	Zip	Phone	Cell	
Email		Voting Location		
Employer*		Occupation*		
I am interested in participating by Phone banking Working Event Booths Election Day Operations	Neig	ghborhood Canvasing lateral Distribution draising	Having a Event Pl Other	a Yard Sign lanning
I nominate the above in	dividual for Mer	mbership in the Chesterfic	eld County Republic	an Committee.
Name/ Signature of current Member	Ma	agisterial District	Date	

I hereby accept my nomination to the Chesterfield County Republican Committee. I am a registered voter in Chesterfield County and am qualified to participate in party actions of the Republican Party in accordance with the State Party Plan (available online at <u>www.rpv.org</u>).

Member Magisterial District

Important Membership Information:

Name/ Signature of current

Article VII, Section C of the *Republican Party Plan of Organization* states: A member of an Official Committee is held to a higher standard of support for nominees of the Republican Party than an individual who merely participates in a mass meeting, party canvass, convention or primary. Therefore, a member of an Official Committee is deemed to have resigned his Committee position if he (a) makes a reportable contribution to and/or (b) allows his name to be publicly used by and/or (c) makes a written or other public statement in support of a candidate in opposition to a Republican nominee in a Virginia General or Special Election.

Article VI, Section 6. (A) of the *CCRC Bylaws* states: Any member who is absent without sending a valid proxy for two (2) consecutive duly called County Committee meetings shall be notified that his membership on the Committee will lapse effective on the next duly called meeting. A person having been so notified may avoid losing membership by attending the next duly called meeting. A person having lost his membership under this subsection may apply for reinstatement to the Executive Committee or to the County Committee.

Please Choose your preferred Membership Type:

Member (Attendance Required and Vote	Associate Member (No Attendance	
Allowed)	<b>Requirement/non-voting</b> )	

As a member of the Chesterfield County Republican Committee, I understand that it is my obligation to support all Republican Nominees who appear on the ballot in Chesterfield County.

Signature of Applicant Date

Date

Date

\*Please remit this form along with a check for \$35 to the Chairman.

Make checks payable to Chesterfield County Republican Committee and are not tax deductible.

Paid for and authorized by the Chesterfield County Republican Committee.