



**BARBARA GITTINGS  
DELAWARE STONEWALL DEMOCRATS**  
**Delaware's Voice for LGBT Democrats**

## Membership Form

Please print and fill out this form. Note the instructions and mailing information at the bottom of this form.

**Full Name** \_\_\_\_\_

**For Household Membership, your Partner's Name** \_\_\_\_\_

**Address (s)** \_\_\_\_\_

**City (s)** \_\_\_\_\_ **State (s)** \_\_\_\_\_ **Zip (s)** \_\_\_\_\_

**Daytime Phone** \_\_\_\_\_ **Other Phone** \_\_\_\_\_

**Email Address** \_\_\_\_\_ **Email Address 2** \_\_\_\_\_

**House District (s)** \_\_\_\_\_ **Senate District (s)** \_\_\_\_\_

**Please check your membership preference:**

\_\_\_\_\_ **General Membership - \$35.00**

- Must be a registered Democrat; includes one, one-year membership

\_\_\_\_\_ **Household Membership - \$60.00**

- Must be a registered Democrat; includes two, one-year memberships

\_\_\_\_\_ **Young Professional - \$25.00**

- Must be a registered Democrat and under the age of 35 years old; includes one, one-year membership

\_\_\_\_\_ **Friend - \$10.00 – \$100.00**

- I am unable to join but I would like to support BGDSD. A great way for non-residents to show support.

After completing this form, please print and mail it along with your check made payable to *BGDSD*.

**Mailing Address:**

**BGDSD**

**PO Box 1024**

**Rehoboth Beach, DE 19971**