

Today's Date: _____

Name: _____

Street address: _____

City: _____

State: _____ Zip code: _____ - _____

County: _____

E-mail: _____

Contact phone number: _____ - _____ - _____ Type: Home Office Cellular

Date of Birth: (month) _____ (day) _____ (year) _____



Do you belong to any other political groups? _____

If "Yes" than please list them and their web sites (if known):

Are you a union member? _____ If "Yes" than please name:

Are there any special issues or concerns that you would like to focus on:

Check off the category of membership under which you are applying:

- Regular () \$45.00 Family () \$80.00 Student () \$20.00 International () \$10.00
- Low income () \$20.00 Sustainer () \$10.00 monthly or \$120.00 annually

Statement of agreement with principles

"Desiring to bring about, by democratic means, a social democratic/democratic socialist society in which all exploitation has been eliminated, I hereby apply for membership in the Social Democrats, USA. I agree to abide by its principles. I am not a member of any totalitarian party or tendency."

Signature: _____