

Democratic Women's Club of Palm Beach County Membership Application / Renewal



Name _____

Address _____

City, State, Zip _____

Telephone _____

Cell Phone _____

Email _____

I am registered to vote as a Democrat.

Signature _____

Please enclose dues payable to "DWC of Palm Beach County" in the amount of \$25.00

An additional \$25 makes you a Club "Angel" for a year.

Mail application and dues to:
Shirley Y Herman, Treasurer
2600 North Flagler Drive #207
West Palm Beach FL 33407