

MANSFIELD DEMOCRATIC TOWN COMMITTEE
APPLICATION FOR MEMBERSHIP

Name: _____

Address: _____

Mansfield, MA 02048

Home phone: _____ Work phone: _____

e-mail address: _____

I am a registered Democrat residing in Mansfield, MA. I give my permission to confirm my residency and party affiliation with the Town Clerk.

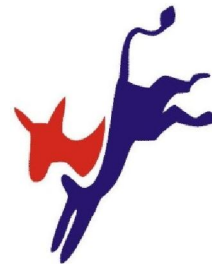
Signed: _____

Date: _____

Please mail to:

Mansfield DTC
c/o Joe Kaplan, VP
150 Rumford Ave. Apt 211
Mansfield, MA 02048

or bring to a DTC meeting.



Visit our web site at www.mansfielddems.org for meeting schedule.