Buckingham County Republican Committee Membership Application

I, _______ hereby declare that I am qualified to seek election for membership in the Buckingham County Republican Committee and affirm that: (*check all that apply*)

I am a registered voter in Buckingham County, Virginia;

I am in accord with the principles of the Republican Party;

I shall support the Republican nominees in the November general election; I understand that if I publicly support a candidate in opposition to a Republican nominee subsequent to a statement of support that I shall not be qualified to participate in party actions for a period of four years; and,

I have not participated in the nominating process of another party in the last five years;

OR

I have participated in the nominating process of another party in the last five years, but I renounce affiliation with any party other than the Republican Party, intend to support the nominees of the Republican Party in the future and understand that the Buckingham County Republican Committee shall provide a copy of this signed renunciation statement to the Republican Party of Virginia, to be maintained for a period of 5 years.

Signature:	Date:
Full Legal Name:	
Registered Voting Address:	
Town:	Zip Code:Voting Precinct:
Home Phone:	Cell Phone:
Email:	
I am submitting this form for the	ne following purposes:
BCRC Membership	: \$15 Mandatory Dues
Amount paid: <u>\$</u>	_ Cash Check
Authorized by the Buckingham County Republican Committee	