

Lancaster County Democratic Committee

Lancaster County, Virginia



Membership Renewal

Name(s): _____

Date: _____

Amount: _____
\$25 single / \$35 couple

_____ check if there are no changes in contact information

Please change my contact information:

Phone

Email address

Mailing address

Applications with check payable to "LCDC" should be returned to:
Treasurer
P.O. Box 318
Kilmarnock, VA 22482