



Democratic Party of Hawai'i
Membership Enrollment Form



Last Name: First Name: Middle Initial: Preferred Name:

Gender: Date of Birth(MM/DD/YEAR): New Member/ Update Record:
New Update

Home Street Apt. City Zip code
Address:

Mailing Street Apt. City Zip code
Address:

Cell Phone: Home Phone: Work Phone: E-Mail Address:

Volunteer: I'm interested in sharing my time and efforts with the party. (Mark all that apply.)

- Canvassing Office Assistance Sign Waving Letter Writing
Parade Marching Phone Banking Staging Events

Find Your 'Ohana: I'm interested in joining the following caucuses. (Mark all that apply.)

- Education Environmental LGBT Hawaiian Affairs Veteran's
Kupuna Labor Women's Young Dems

I am currently registered to vote in the State of Hawai'i. (If you have not registered, or have not voted in either of the last two general elections, changed your name, or have moved since last registering, please also complete a Voter Registration Online with the Office of Elections website.) By signing this form, I agree to adhere to the principles of the Democratic Party of Hawai'i and support its Constitution and Bylaws. I understand the information given above may be used by the Party and its members for Party-related contact and informational purposes.

Signature: Join Date: (MM/DD/YEAR)

The Constitution of the Democratic Party of Hawai'i calls for annual voluntary membership dues of \$25. Contributions to the Party may be made by check or Online. Please make checks payable to the Democratic Party of Hawai'i. To donate Online please click the link below.

Click here to donate to the Democratic Party of Hawai'i.

In order to complete this form you must fill-in, print, sign, and mail to:
Democratic Party of Hawai'i
P.O. Box 2041
Honolulu, HI 96805

You may also save as a PDF and e-mail to:
Info@hawaiidemocrats.org