

Membership Form - DCDP Native American Caucus

Name: _____

Address: _____

Telephone Numbers at which we may reach you:

Landline: _____

Work: _____

Mobile: _____ OK to text? _____

Email: _____

Legislative District: _____

Tribal Identity/Identities: _____

See By-Laws Article I, Section 2 for Definition of “Native American” as understood in this Caucus; See By-Laws Article III for categories of Membership.

Suggested Dues: \$15 per year, not pro-rated, not refundable. A “year” is defined as July-June each year.

By turning in this Membership Form, I certify that I am currently and intend to remain a registered Democrat residing in Douglas County, Nebraska, and that I have a primary identity as Native American or am interested in and in accord with issues of Native American Peoples.

Signature: _____

Date: _____