## **BPC-CHARLOTTE MEMBERSHIP APPLICATION FORM**

Mission Statement:

Through a shared vision and commitment to those we serve, the Black Political Caucus of Charlotte-Mecklenburg will promote and enhance the power and welfare of the Black community through advocacy and education and a consistent voice in matters of education; economics; cultural, social, civic welfare; and political activity within the Charlotte-Mecklenburg metropolitan area.

Meeting/Event



PO Box 16550 Charlotte, NC 28297 www.bpc-charlotte.org blackpoliticalcaucus@gmail.com

Black Political Caucus of Charlotte-Mecklenburg

PERSONAL INFORMATION				
NAME OF MEMBER	First		Last	
MAILING ADDRESS	Street Apt			
	City/State/Zip			
CONTACT PHONE	S <del></del>	(Home)		_(Cell)
EMPLOYER	A			
OCCUPATION		The same state of the same sta		12
EMAIL ADDRESS				
VOTER INFORMATION				
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COMMITTEE SELECTION (Descriptions of each on back of form)				
☐Membership ☐Budget/Finance ☐Publicity	☐GOTV ☐Legislative ☐Banquet		sues/Candidates ommunity Affairs conomic Development	☐Education ☐Courtesy
Signature			Date	
FINANCIAL INFORMATION—DO NOT WRITE BELOW THIS LINE—FOR OFFICIALS ONLY				
Information Logged byNew Member: Date Rece ☐ Lifetime Member ☐ Member Renewal: Date Method of Payment:	ived Honorary Member/Renew	(Initials/Date) Date Eligible to Vote wal Date:  MO/Cashier's Check Check #	Personal	Check # n Check #
□Mail		Nam	e of Campaign Account	
☐Hand Delivered by				