



TEJANO DEMOCRATS

La Voz Del Pueblo

MEMBERSHIP FORM 2026 - 2027

Membership Status:		
New <input type="checkbox"/>	Renewal <input type="checkbox"/>	At-Large <input type="checkbox"/>
Name:		Date:
Home Address:		City/Zip:
Mailing Address:		City/Zip:
Phone/Cell.:	Phone/Home:	Phone/Work:
Email:	Date of Birth:	
Senate District:	County:	Voter Reg. ID:
Membership fee \$15.00 for state dues. Any donation to our chapter that is over \$50.00 is reported to the State Ethics Commission, as we are registered with that division.		
Required Occupation:		*Required* Employer:
Required Signature:		
Send Membership Fee and Completed Form to : Bexar County SD19 Tejano Democrats, Claudia Sanchez-Secretary 1800 Frederickburg Rd , Suite 120 San Antonio TX 78201		