



## Officer Membership Application, 2024 - 2026 Term

Name: \_\_\_\_\_

Please indicate the Giles County voting precinct in which you vote: \_\_\_\_\_

Street Address: \_\_\_\_\_

\_\_\_\_\_

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Mailing Address (if different than Street Address): \_\_\_\_\_

\_\_\_\_\_

Email Address: \_\_\_\_\_

I \_\_\_\_\_, do hereby declare that I am a candidate for

(Circle desired office below)

**Chairman      Vice-Chairman      Treasurer      Secretary**

**Of the Giles County Republican committee. I certify that I am a qualified and registered voter of Giles County. I also certify that I am in accord with the principles of the Republican Party, and that I intend to support the Republican Nominees in the November 2024 elections.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*By signing, I certify that the information contained in this application is true to the best of my knowledge. I also certify that I am in accord with the principles of the Republican Party and I intend to support Republican candidates in any election.*

### **Fee**

*A non-refundable \$50.00 filing fee is required*

\$ \_\_\_\_\_ Paid by: Cash      Check

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_