



Clark County Republican Central Committee (CCRCC)

Membership Application

Thank you for your interest in joining the Clark County Republican Party!
We look forward to working together to make OUR party stronger!

Part 1: Instructions

1. To become a member of the CCRCC, complete all fields below.
2. Your voter registration status will be verified with the Clark County Elections Department. You must be a registered Republican residing in Clark County, Nevada, to be a member of the CCRCC.
3. The name and address you provide on this application must be the exact name on your voter registration and the physical address where you are registered to vote.
4. After your eligibility is verified, your name will be presented to the membership at the next central committee meeting for approval to be added as a member.
5. If you do not know your Clark County Voter Registration Number, Precinct, or Commission District, you may obtain the information by logging into: www.clarkcountynv.gov/election/Pages/VoterServices.aspx
6. Please print **CLEARLY** and **LEGIBLY**

Part 2: To be completed by applicant

Clark County Voter Registration #: _____ Commission District: _____ Precinct: _____

Last name: _____ First name: _____ Middle initial: _____

Preferred name (for name badges/credentials, if different from first name): _____

Physical address:

Street address: _____

City: _____ ZIP code: _____

Mailing address, if different:

Street address: _____

City: _____ ZIP code: _____

Phone number: _____ - _____ - _____ Email address: _____

Date of birth (mm/dd/yyyy): ____ / ____ / ____

Part 3: Important Notices

1. By providing your email address, you are authorizing the Clark County Republican Party to provide you with electronic notices and communications of all official business.
2. You are responsible for keeping the CCRCC informed of any changes to your contact information (mailing address, telephone number, email address, etc.)
3. Your information will not be sold to nor shared with any third party organization.
4. By signing below I submit my application to be a member of the Clark County Republican Central Committee.

Applicant Signature: _____ Date: _____

Part 4: For Office Use Only

Application verified by: _____
Verification Date: _____

Application: Approved
 Rejected

Scheduled consent calendar,
(mm/yy): ____ / ____