



National Convention Delegate Candidate Form

Must be Received by 5pm May 8, 2012:
WV Democratic Party
717 Lee Street, Suite 214
Charleston, WV 25301
Phone: 304.342.8121 Fax: 304.342.8122

REQUIRED INFORMATION

Check the category(s) you wish to apply as delegate:

U.S. Congressional District _____ At-large _____
(elected by state convention delegates) (elected by State Exec. Committee)

Presidential Candidate you support: _____

County: _____ U.S. Congressional District: _____

Name: _____ Gender: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Contact Numbers: Home: _____ Cell: _____

Email: _____

I hereby swear and affirm that I'm a registered Democrat and legal resident of the above listed county:

Signature: _____ Date: _____

OPTIONAL INFORMATION:

The information below is not required and will not be distributed at the State Convention. It is used to calculate the demographic makeup of our delegation.

Age: _____ What is your racial/ethnic background? _____

Are you a member of any of the following constituency groups?
(Please check all that apply)

____ Youth (18-35 years of age) ____ Senior (Over 65 years of age) ____ Disabled ____ LGBT

____ Veteran or Active Duty Military (Please indicate branch) ____ Labor Union (Please indicate affiliation)