## **GREEN PARTY OF MISSISSIPPI**

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## **Membership Form**

(Please print and be sure to fill out all information)

Name as on voter registration roll:	
if different, name(s) by which you	are known:
MAILING ADDRESS: Number & Street or Box	
City	State MS ZIP+4
Phone ()	Phone ()
Email Address	Birth Year
County	Congressional District
Voting Precinct Name/Number	
Year I began living in this preci	nct in this county in MS
State Senate District	State House District
County Supervisor District	Municipal Ward, if you live inside a municipality
form, I am becoming a member of the other political party or a supporter of	ct above, in which I currently reside. By filling out this ne Green Party of Mississippi. I am not a member of any fany other political party at any level. I will notify the GP re information changes and provide current information.
social and economic justice, and agreement with the Ten Key Values Social Justice, Grassroots Democratical Social	sippi and its purposes for peace, grassroots democracy, an ecologically sustainable society. I am in general s of the Green Party of Mississippi: Ecological Wisdom, racy, Nonviolence, Decentralization, Community-Based ect for Diversity, Personal and Global Responsibility, and
Signature	Date

There are no membership dues for the Green Party of Mississippi. If possible, please send an individual donation of no more than \$200 with your form. Donations to the Green Party of Mississippi are not tax-deductible.

Please keep a copy & mail this form to Green Party of MS, P. O. Box 3234, MS 39207