



**Augusta County Republican Committee
Official Filing Form for Membership, Delegate-Alternate
Party Canvass on March 23, 2024, 10:00 AM – 2:00 PM**

ACRC USE ONLY	
Date Rec	_____
Amt Paid	_____
Cash	_____ Check No _____

I am filing: Check appropriate line(s)

_____ **FOR MEMBERSHIP** of the Augusta County Republican Committee (ACRC). Filing for Membership is **ENCOURAGED but NOT REQUIRED**.

_____ Annual ACRC **Voting Membership Dues** of Twenty-four Dollars (\$24.00) attached, **OR**
_____ Payment to be paid on or before the next Committee meeting.

_____ **To seek selection as a Delegate or Alternate (Circle your choice) representing Augusta County at the 6th District Convention.** Filing to be a Delegate/Alternate is **REQUIRED**.

_____ Forty-five dollars (\$45.00) **MANDATORY** registration fee for the 6th District Convention.

_____ **To seek selection as a Delegate or Alternate (Circle your choice) representing Augusta County at the Republican Party of Virginia’s 2024 Quadrennial State Convention.** Filing to be a Delegate or /Alternate is **REQUIRED**.

_____ Forty-five dollars (\$45.00) **MANDATORY** registration fee for the State Convention.

Please complete and return this Pre-file form with a check for required fees payable to the ACRC, to Dave Grembi, ACRC Secretary, in-person, or to P.O. Box 430 Verona, VA 24482, per the ACRC Party Canvass Call instructions.

Delegates or Alternates: Filing to be a Delegate or Alternate is MANDATORY. Filing Deadline for Delegates or Alternates is March 1, 2024, at 1:00 PM.

ACRC Membership: Filing to be a Member of the Augusta County Republican Committee is ENCOURAGED by March 1, 2024, at 1:00 PM, but NOT required. If individuals desiring to be a Member of the Augusta County Republican Committee do not submit a pre-file form by March 1, 2024, they may complete a filing form at the Party Canvass on March 23, 2024, by 2:00 PM, **OR** as defined in the Party Canvass Call notification if the Party Canvass is cancelled.

Please Type or Print legibly. Complete ALL sections below.

I, _____, do hereby declare that I seek to be elected to the
(PRINT NAME)

Republican Party office/position(s) noted above. I certify that I am a qualified and registered voter and vote at
_____ (polling location) in Augusta County.

Signature _____ **Date** _____

Republican Party Pledge

I hereby declare that I intend to support **ALL** the nominees of the Republican Party of Virginia for public office in the ensuing elections.

- 1) I am in accord with the principles of the Republican Party,
- 2) I have not participated in Virginia in the nomination process of a party other than the Republican Party in the last five (5) years,
- 3) I now renounce affiliation with any other political party.

Signature: _____ Date: _____

Contact Information

My residence address is: _____

My mailing address: _____

My email address: _____

Home phone number: _____ Cell number: _____

Occupation: _____

Employer: _____

**Please complete and return this form as stated in the ACRC Party Canvass Call instructions.
Please make one check payable to the ACRC for all required fees.**

Authorized and paid for by the Augusta County Republican Committee