



# CONSTITUTION PARTY OF SOUTH CAROLINA

P.O. Box 1757 Taylors, SC 29687

[www.sconstitutionparty.com](http://www.sconstitutionparty.com)

TO: Tim Crane, Chairman  
SC Constitution Party  
P.O. Box 1757  
Taylors, SC 29687

( ) New Member,

( ) Membership Renewal.

\$25 per individual (\$40 for spouses) for calendar year 20\_\_\_\_

Total: \$\_\_\_\_\_

Please make checks payable to: SC CONSTITUTION PARTY, (Not tax deductible)

Name\_\_\_\_\_

Spouse's name, if joining \_\_\_\_\_

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

City \_\_\_\_\_ County \_\_\_\_\_

Precinct \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Home, work, or cell phone for each applicant \_\_\_\_\_

\_\_\_\_\_  
Email address for each applicant

\_\_\_\_\_  
Occupation of each new member (required by SC Election Commission)

I have read the party's latest National Platform as posted at [constitutionparty.com](http://constitutionparty.com) and hereby agree to support the platform. Any exceptions that I have to the platform I have listed on the back side of this application form.

I understand that my new member SCCP voting privileges will not become effective until a minimum of fifteen (15) days has elapsed after the date that the SCCP treasurer receives my application and dues. New memberships are subject to the approval of both the State Chairman and the State Central Committee.

I agree to abide by the rules of the SC Constitution Party and to accept the decisions of the SCCP Central Committee as final. I certify that I am a SC registered voter.

I am willing to help with phone \_\_\_\_\_, mail/email tasks \_\_\_\_\_.

I would like to run for office \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date