

PRECINCT CAUCUS REGISTRATION FORM

Please print legibly

Name: _____

Address: _____

City: _____ State: MN Zip: _____

Phone: (____) ____ - _____ E-mail: _____

Precinct: _____

Eligibility: I live at the address indicated above, which is within this precinct. By Nov. 5, 2018, I will be at least 18 and eligible to vote as required to become a delegate or alternate (Participant); or I will be at least 16 as required to hold party office (Youth). I consider myself a member of the DFL Party. I am not an active member of any other political party. I agree with the principles of the DFL Party as stated in the DFL Constitution and Bylaws.

Signature: I affirm that the above is true and correct.

Signature: _____ Date: _____

I attend this precinct caucus as a Participant, Youth, or Visitor.

I will be an Election Judge. I have previously voted in Minnesota.

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