



# Kissena Democratic Club

## Membership Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Are you a U.S. citizen? Y / N

Are you a registered voter in New York? Y / N

(If No, we can assist you)

Are you a member of the Democratic Party? Y / N

(If No, we can assist you)

Please submit completed application by mail to:  
59-25 Kissena Blvd, Ste 800, Flushing, NY 11355

OR by email to:  
[info@kissenademocratic.com](mailto:info@kissenademocratic.com)