

VERMILION 300

IN SUPPORT OF SHERIFF EDDIE LANGLINAIS



MEMBERSHIP APPLICATION

Single Membership _____ \$300
Joint Spousal Membership _____ \$500

FULL NAME: _____

IF JOINT MEMBERSHIP

SPOUSE'S NAME: _____

MAILING ADDRESS: _____

PHONE: _____ **SPOUSE'S PHONE:** _____

EMAIL: _____ **SPOUSE'S EMAIL:** _____

BIRTHDATE: _____ **SPOUSE'S BIRTHDATE:** _____

Shirt Size: _____ **Spouse's Shirt Size (Joint membership)** _____

The above information is true and correct, and I hereby authorize the Campaign of Eddie Langlinais and/or it's agents to make an independent investigation of my background, references, character, criminal or police records, including those maintained by both public and private organizations, and all public records for the purpose of confirming the information contained on this application and/or obtaining other information that may be material to my qualifications now, or, if applicable, during the tenure of my membership. By signing this document, I release the Campaign of Eddie Langlinais Organization from any liability for an opinion(s) it may form or any decision it might make regarding my qualifications to be a member of the Vermilion 300.

Signature: _____ **Date:** _____

Spouse's Signature (if applicable) _____

Submit completed applications and payments to **1201 Richlan Rd, Erath, LA 70533** OR email to Lyndi.Langlinais@gmail.com. Checks or Money Orders must be made out to "**Campaign of Eddie Langlinais**" or pay on the website www.SheriffEddieVPSO.com by clicking the donate button. Individual memberships are \$300 and joint spousal memberships are \$500.00.

For Office Use Only

Date Received: _____ **Payment Type:** Check _____ Anedot _____ Money Order _____ **Amt:** _____

Membership Year _____ **Member #:** _____ **Spouse #** _____ **Initials:** _____