

We must have a updated contact information sheet on file for each member planning to serve

C O N T A C T I N F O	Official name of the service club you will be working with: ROSEVILLE COALITION OF NEIGHBORHOOD ASSOCIATIONS	
	First Name:	Last Name:
	Date of Birth: (00/00/0000)	CA Drivers License:
	Residential Address: (Do not provide a mailing address or PO Box in this field)	
	City / State:	Zip Code:
	Mailing address: (if different than above)	
	City / State:	Zip Code:
	Contact Phone Number:	Alternate Number:
	Email Address:	
	Registered to Vote in Placer County? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If you are registered to vote in a different County please specify:		
Do you speak and understand one or more languages other than English? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If yes, please specify:		

R E A D & S I G N	Please read the following service club responsibilities and sign below. If you have any questions, contact the Elections Office.	
	★ I understand that if any of the above contact information changes, it is the service club's responsibility to fill out a new application and submit it to the Elections Office.	
	★ I understand that it is the service club's responsibility to ensure that all members of the club, who are planning to serve, meet all the requirements to be a vote center worker in the state of California.	
	★ I understand that it is the service club's full responsibility to staff their assigned vote center(s) and provide the Elections office with a contact information sheet for each member planning to serve.	
	★ I understand that the service club must have a minimum of 8 participants and that it is the club's responsibility to provide replacements if a member cancels or is not able to serve.	
	★ I understand that senior election aides and election aides in Placer County must attend a mandatory training prior to each election.	
	★ I understand that the service club will receive one cumulative stipend check and that checks will be mailed 6-8 weeks after the election to the payee information provided above.	
	★ I understand that submitting this application does not guarantee placement.	
	★ Attached is a copy of this service club's current W-9 form.	
	Signature _____	Date _____
Print Name _____		

DEADLINE

RETURN VIA E-MAIL, ~~FAX~~, MAIL OR IN PERSON TO:

7-20-2024 Sue Hallahan-Cook: Sue@RENATECH.ORG
2697 Pipestone Loop, Roseville, CA 95747

Your NA: _____