

STATEWIDE EDUCATION ORGANIZING COMMITTEE

“FRIENDS OF SEOC”
APPLICATION FORM

YES, I want to be a “Friend of SEOC” and am making a donation today of

\$ _____

YES, I want to be a “Friend of SEOC” and am making a pledge today of

\$ _____

My Name _____
Address _____
Phone(s) _____
Email _____

I would also like to help SEOC in the following ways:
(Please check all that apply)

Hosting or co-hosting a fundraising house party

Reaching out to other potential “Friends” and/or sharing contacts with SEOC staff and leaders

Providing rides when I’m available to SEOC members who occasionally travel to Trenton to speak at hearings or press events as part of a campaign

Spreading the word and/or writing Letters to Editors of local papers when our campaigns require us to gain supporters outside of the districts where we have chapters

Using my skills in any other way that would be helpful
(Please specify below)
