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## Alabama Silver-Haired Legislature Candidacy Information Form

Full Name (Please print) \_\_\_\_\_

Street Address \_\_\_\_\_

City/Zip Code \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email Address \_\_\_\_\_

Please Sign Full Name \_\_\_\_\_

By completing this Candidacy Information Form, I hereby declare that I am a registered voter in \_\_\_\_\_

The State of Alabama, am at least 60 years of age, and am a resident of county

\_\_\_\_\_.

Confirm that you will be available to attend District meeting and the annual meeting in Montgomery, usually in October. \_\_\_\_Y\_\_\_\_N

I am concerned about senior issues \_\_\_\_Y\_\_\_\_N

If you need additional information, please contact Linda DeMarco, Chair at 205-979-8993, email [lhdemarco@bellsouth.net](mailto:lhdemarco@bellsouth.net), cell 250-568-5500.

Other information you may want to share: \_\_\_\_\_

\_\_\_\_\_

