



# Travis County Voter Registration Partnership Application

Name of Organization \_\_\_\_\_

Type of Organization (See Eligibility) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

RED

WHITE

BLUE

## PARTNERSHIP COMMITMENT AGREEMENT

(Must be an activity, contribution or in-kind contribution that supports and maintains voter registration efforts in Travis County)

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As a Voter Registration Partner our organization will commit to...

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We agree to conduct all voter registration activities in accordance with Travis County voter registration policies and state and federal laws.

\_\_\_\_\_  
Name and Title of Authorized Organization Representative

\_\_\_\_\_  
Signature of Authorized Organization Representative

\_\_\_\_\_  
Date