

**LISTSERVE APPLICATION  
COUNTY & DISTRICT CLERKS' ASSOCIATION**

**PLEASE PRINT CLEARLY.**

**COUNTY:** \_\_\_\_\_

**OFFICE:** (Please circle)

**COUNTY CLERK  
DISTRICT CLERK  
COUNTY/DISTRICT CLERK  
DEPUTY CLERK (Please provide the office.)**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**OFFICE PHONE NUMBER:** \_\_\_\_\_

**OFFICE FAX NUMBER:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

I would like to apply for membership to the list serve. I agree to abide by the CDCA list serve rules and regulations.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**DO NOT SEND YOUR APPLICATION TO TAC.**

**MAIL OR FAX APPLICATION TO:** Joyce Hudman  
President of CDCA  
Brazoria County Clerk  
111 E. Locust St., Ste. 200  
Angleton, TX 77575  
(Fax) 979-864-1358

**DO NOT WRITE IN THIS SPACE:**

**APPROVAL:** \_\_\_\_\_

**SENT TO TAC:** \_\_\_\_\_

**TAC FAX NUMBER: 512.478.0519**

**DATE:** \_\_\_\_\_