



MEMBERSHIP APPLICATION

CHCA is a non-profit volunteer community organization that relies on the support of member participation and dues. We have 3 membership types: residential and merchant; anyone may attend our meetings, but only members may vote. We are happy to add you to our email list, but only members will be added to mail and phone lists.

Applicant Information

Membership type: (circle one) **Date paid** _____
Residential (\$30/household/year) **Senior/Student** (\$20/household/year) **Merchant** (\$125/year)
Name: (residents please enter one name to represent your household, merchants please enter your business name)

Address: (please include apt # if applicable and zip)

Phone:	Fax:	E-mail:
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Preferred method of communication: (circle one) **E-mail** **Phone**

Additional Contacts: (residents please add other household members, merchants please note the position of each contact listed)

Name	Phone/E-mail	Position

Volunteer Information

I would be willing to help with the following: (please circle all that apply)

- | | |
|--------------------------|---------------------------|
| Administrative/Financial | Fundraising/Grant Writing |
| Community Outreach | Landmarks |
| Go Green Go Clean | Public Safety |

What is your interest in Crow Hill Association?:

Thank you for your interest & support