

MEMBERSHIP APPLICATION

(please print legibly) Date: Name Address Evening Telephone Day Cell Email Our neighborhood association depends upon you, its membes, to make it effective. In order to attain what your interests and skills are, would you please provide us with answers to the following questions. Thank you. INTERESTS Do you wish to be involved in: Committee activities Projects or events \bigcirc On an ongoing basis **Occassionally** Office activities Fundraising Crime Watch Children's activities Other Interests SKILLS Please check the skills you can bring to our neighborhood association. \bigcirc artistic design/decoration clerical \bigcirc computer skills fundraising experience as a committee member hospitality \subset financial planning/management public relations/speaking \bigcirc newsletter writing/editing community outreach \bigcirc experience as a committee chairperson \bigcirc other interests Do you have access to equipment, such as computers, copy machines, etc. which could help the association? If so, what?

We rely on membership dues to produce events, flyer distribution, and contribute to neighborhood improvements, when feasible. **Dues are \$10/per member/\$15 per household/\$20/per business.** Membership period is January to December.

Membership allows you to vote on matters affecting PSNA business.