

ECA 2009 Membership Application

PLEASE FILL-IN THE BLANKS AND CHECK THE APPROPRIATE BOXES

Note: Individual Annual Memberships dues cover the calendar year: January 1 - December 31.

____ Individual Regular Membership \$20 each (or \$30 per couple) \$____
(resident or property owner)

____ Individual Associate Membership \$20 each \$____
(non-resident or property)

____ Contribution (Holiday sharing, Christmas in April, or other \$____
_____))

Total Enclosed \$____

Interested in the following committees:

- | | | | |
|---------------------------------------|--|---|-----------------------------------|
| <input type="checkbox"/> Architecture | <input type="checkbox"/> Audit | <input type="checkbox"/> Development & Zoning | <input type="checkbox"/> Maritime |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Parking & Traffic | <input type="checkbox"/> Safety | <input type="checkbox"/> Tours |
| <input type="checkbox"/> Nominating | | | |

Name _____

Spouse _____

Mailing Address _____

Property Address _____

Email _____

(Your email address will enable you to be notified quickly when the need arises.)

Phone: Residence _____

Business _____

Email _____

- To save our Association the cost of postage, I would prefer to receive the Newsletter via the ECA website. I understand that each member will receive an email with a direct link to the Newsletter each month of publication.

Please print out this form, fill in the blanks and check the appropriate boxes, and make out your check to the **Eastport Civic Association.**

Please mail this form and your check to:

Eastport Civic Association
PO Box 3539
Annapolis, MD 21403

Thanks for your support!