

CLEMENTS CIRCLE CIVIC ASSOCIATION • CCCA •
2009 MEMBERSHIP

CONTACT INFORMATION:

MEMBER FIRST NAME LAST NAME

SPOUSE FIRST NAME LAST NAME

MAILING ADDRESS

CITY/STATE/ZIP

PHONE # HOME

PHONE # MOBILE

PRIMARY EMAIL

SECONDARY EMAIL

CHILDREN: NAME

AGE GROUP

_____	<input type="checkbox"/> 0 - 5	<input type="checkbox"/> 6 - 12	<input type="checkbox"/> 13 - 18
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_____	<input type="checkbox"/> 0 - 5	<input type="checkbox"/> 6 - 12	<input type="checkbox"/> 13 - 18

ARE YOU A NEW CCCA MEMBER? Y N

ARE YOU RENEWING YOU MEMBERSHIP? Y N

ARE YOU INTERESTED IN BECOMING INVOLVED IN CCCA ACTIVITIES? Y N

PLEASE LIST YOUR INTERESTS: EVENT PLANNING YOUTH ACTIVITIES
 NEWSLETTER WELCOMER OTHER - SPECIFY

ONLY \$10 PER HOUSEHOLD

MAKES CHECKS OR MONEY ORDER PAYABLE TO: CCCA

MODES OF PAYMENT (CHECK BOX):

PERSONAL CHECK CASH MONEY ORDER

MAIL THIS FORM TO: CCCA P.O. Box 511366, LIVONIA, MI 48151

ANY MEMBERSHIP QUESTIONS CAN BE DIRECTED TO:
MEMBERSHIP@CLEMENTSCIRCLE.ORG OR 734 237-3606

YOU CAN ALSO JOIN ON-LINE BY GOING TO: WWW.CLEMENTSCIRCLE.ORG/JOIN