

CORNVILLE COMMUNITY ASSOCIATION
P.O. Box 1452 Cornville, Arizona 86325
Application for Membership (required each year)
Calendar Year 2017

Purpose: (check one)

New Member Renewal (existing member) Reinstatement (returning - not registered in 2016)

Membership Type (select one)

- Resident of zip code 86325
- Non-Resident Property Owner in 86325
- Business located in 86325

Business Name: _____ (list owners below)

Cornville physical address - property or business _____

Mailing address, if different _____

Member Information:

Primary Member (or Business Owner) Name: _____

Co-Member (or Business Owner) Name: _____

Email Address: _____

We urge you to provide a current email address (and let us know if it changes) so we can provide you with meeting or other important association information. **We will never sell or share your personal information with outside parties.**

Phone numbers:

Home _____ Cell _____

Business _____ Second Cell _____

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Please mark the type of membership and payment you are including

| | | | |
|--|----------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> Individual | \$10 | | |
| <input type="checkbox"/> Family | \$15 | | |
| <input type="checkbox"/> Business | \$15 | | |
| <input type="checkbox"/> Additional donation | \$ ____ | | |
| TOTAL | \$ ____ | <input type="checkbox"/> check | <input type="checkbox"/> cash |