



River District Neighborhood Association  
(RDNA)

## MEMBERSHIP APPLICATION

### PLEASE PRINT

Name: \_\_\_\_\_ Spouse \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-mail: \_\_\_\_\_ Occupation: \_\_\_\_\_

### NEW MEMBERSHIP

The organization has three membership categories. Please indicate which membership category you are applying for :

1. \_\_\_\_\_ Resident Member: Individual or family who resides in the River District Neighborhood Association and participates in all Resources-driven programs.
2. \_\_\_\_\_ Business Member: An individual who owns or operates a business in the immediate area located near the River District Neighborhood Association and participation in all resource-driven programs.
3. \_\_\_\_\_ Affiliated Member: An individual or family who has an interest in River District Neighborhood Association, but doesn't own Property or a business, and participates in all resource-driven programs (employee in a business, sponsor, etc.)

Dues are payable when application is submitted.

Residence Membership is \$20.00 annually

Business Membership is \$30.00 annually

Affiliated Membership is \$30.00 annually

As a member of the Neighborhood Association, I am aware that annual dues are paid annually and that the Association will be as strong as the commitment and engagement of its Membership.

### MEMBERSHIP INVOLVEMENT AND INTEREST

Please select any of the following RDNA interest you would like to be involved with:

- |                                      |                             |                             |
|--------------------------------------|-----------------------------|-----------------------------|
| _____ Public Relations/Communication | _____ Newsletter            | _____ Historic Preservation |
| _____ Membership Committee           | _____ Security Committee    | _____ Coder Enforcement     |
| _____ Street Captain                 | _____ Community Enhancement | _____ Other                 |

Signature of Application: \_\_\_\_\_ Date: \_\_\_\_\_