

CHURCH HILL ASSOCIATION MEMBERSHIP FORM

P.O BOX 8031 RICHMOND, VIRGINIA 23223

MAIL TO THE ADDRESS ABOVE OR BRING TO THE NEXT MEMBERSHIP MEETING.

MEMBER NAME #1: _____

MEMBER NAME #2: _____

STREET ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ NEW MEMBER () RENEWING MEMBER ()

EMAIL: _____

PROVIDING YOUR EMAIL ADDRESS GIVES CHA PERMISSION TO CONTACT YOU ABOUT NEWS OR EVENTS

CASH ____ CHECK ____ (MAKE CHECK PAYABLE TO CHA) \$25 PER PERSON ____ MEMBERSHIPS = \$

FOR OFFICAL USE ONLY CARD () BAG () DATE: _____