



Neskowin Community Association

Neskowin Community Association 2014 Membership Form

Name(s): _____

Mailing Address: _____

Mailing City/State/Zip: _____

Home Phone: _____

Cell Phone (name/number): _____

Cell Phone (name/number): _____

Email (name/email address): _____

Email (name/email address): _____

Neskowin Street Address: _____

Neskowin Home Phone: _____

Your contact information (above) will be published in the 2014/15 NCA Member Directory; unless you indicate which information should remain confidential.

DUES

___ \$25.00 dues for 2014
Membership term is May 2014 through May 2015

___ I would like to support fireworks with \$ _____
(Recommended contribution per family: \$50.00)

___ I would like to make a general donation with \$ _____

VOLUNTEER OPPORTUNITIES

- ___ NCA Board member
- ___ Newsletter article contribution
- ___ Beach cleanup July 5th
- ___ Fireworks security
- ___ Cottage walk 2014
- ___ Memorial weekend 2015 / burn pile, swap meet, bake sale
- ___ Other _____

NEWSLETTER FORMAT

I would like to receive my newsletter via: (check one):

___ US Postal Mail ___ Email

Return this form with payment to: NCA Membership, PO Box 820, Neskowin, OR 97149