



ECA MEMBERSHIP APPLICATION

Please fill in the blanks and check the appropriate boxes

Note: Individual Annual Memberships dues cover the calendar year: January 1 - December 31

Individual Regular Membership (\$25 each or \$35 per couple) (resident or property owner)	\$ _____
Individual Associate Membership (\$25 each) (non-resident)	\$ _____
Contributions for Worthy Causes \$20 \$50 \$100 Other \$ _____ <i>See ECA website for information on causes ECA has supported</i>	Total Contribution \$ _____
	TOTAL ENCLOSED \$ _____

Make Your Check Payable to the Eastport Civic Association

Name:	
Spouse Name:	
Mailing Address:	
Property Address:	
Email: <i>Your email address will enable you to be notified quickly when the need arises.</i>	
Phone Number: <input type="radio"/> Cell <input type="radio"/> Home <input type="radio"/> Work _____ (____) _____ - _____ <input type="radio"/> Cell <input type="radio"/> Home <input type="radio"/> Work _____ (____) _____ - _____	
<input type="radio"/> Yes! I am interested in volunteering with the ECA. Please have an ECA Volunteer Coordinator contact me.	
<input type="radio"/> All ECA communication is sent by email, so providing an email address (or two for couples) is very important. I understand that each member will receive eblasts or notifications.	

Please send your completed information: Eastport Civic Association, P.O. Box 3539, Annapolis, MD 21403

Thanks for you support!