

Yes, I'm joining Summit Neighborhood Association today!

Enclosed is my member contribution of: \$15 \$25 \$35 \$50 Other: \$_____

Name: (please print clearly) _____

Street Address: (required) _____ **Zip Code:** _____

Phone: (_____) _____ - _____ (day) (_____) _____ - _____ (evening)

Email: _____ Yes, I can distribute newsletters

Family Membership - list information about other adults in your household who wish to be members:

Name: _____ Email: _____

Name: _____ Email: _____

Please enclose a check made out to: **Summit Neighborhood Association**

MAIL TO: **SNA, P.O. Box 41092, Providence, RI 02940**

TODAY'S DATE ___ / ___ / _____