

MEMBERSHIP APPLICATION

They are as follows: \$12 for single, \$18 for a family, \$36 for a community organization such as a church or block watch, and \$48 for Friends of the 7th Ward (that would be our business friends).

PLEASE ENCLOSE OR ATTACH THIS MEMBERSHIP FORM WITH YOUR PAYMENT.

Mail to: Treasurer, 7th Ward Citizens Coalition, Inc., P.O. Box 1264, Youngstown, Ohio, 44501

NAME(S) _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP _____ PHONE _____

E-mail Address _____

_____ NEW _____ RENEWAL
_____ Single (\$12) _____ Family (\$18) _____ Community Organization (\$36)
_____ Friend of the 7th Ward (\$48)

PLEASE NOTE: Your phone number will be submitted to City Watch Program which will leave messages about meetings and other Coalition-related events.

FOR COALITION USE: Paid by cash _____ Paid by check no. _____

Date _____