

Linglestown Area Civic Association
2400 Blue Mountain Parkway, Linglestown PA 17112

Membership Application

One person/name per Membership please

Name: _____

Street Address: _____

City, State, Zip: _____

Primary Phone: _____

Email: _____

Please Check One (for statistics only):

RPO, Resident Property Owner in Village Area

PO, Property Owner in Village Area

R, Resident-(current or former) in Village Area

P, Patron

I am interested in the following in the following committee (s):

Ways & Means (Revenue Generation) Special Events

Historical Preservation Annual Events

Village Beautification Website/Newsletter

Annual Membership Fee \$10.00 (for calendar year)

If you do not have email and would like the monthly meeting minutes mailed to you please **add \$6.00 to your membership dues** for a total of **\$16.00**.

Payable to L.A.C.A.

Send to:

Christine Besancon Treas.

6215 Autumn View Dr.

Linglestown, PA 17112

Office Use:

CASH or Ck# _____

Date Received _____