

The Civic Association of Chadds Ford Township
Resident Membership Application



Name _____

Address _____

City _____

Telephone _____ E-mail _____

I am interested in working on _____

Membership, limited to residents of Chadds Ford Township, entitles you to vote at the Association's annual meeting and to participate in its activities. Membership dues are \$20 per household. Additional donations are appreciated and suggestions welcomed. Indicate amount paid and send your check payable to CACFT in the enclosed envelope to P.O. Box 823, Chadds Ford PA 19317. The Civic Association is now making every effort to go green and will no longer send out membership cards. Your cancelled check will serve as your receipt and proof of membership. Providing us with your residential e-mail is also appreciated.

\$20 \$30 \$50 \$100 Other \$