

## **MEMBERSHIP FORM**



904-513-9242 www.beacheswatch.com info@beacheswatch.com



Please send completed form and payment to:

P.O. Box 50311 Jacksonville Beach Florida • 32240

| and Jacksonville Beacl                | nes.                 |  |                          |  |
|---------------------------------------|----------------------|--|--------------------------|--|
| NAME:                                 |                      |  |                          |  |
| HOME ADDRESS:                         |                      | STATE:ZIP:                                   |                          |  |
|                                       |                      |  |                          |  |
| HOME PHONE:                           |                      |  |                          |  |
| CELL PHONE:                           |                      |  |                          |  |
| To receive information email address: | DDRESS:              |  |                          |  |
| EMAIL ADDRESS:                        |                      |  |                          |  |
| I certify that my inform              | nation is complete o | and accurate.                                |                          |  |
| Signature                             |                      |  |                          |  |
| YEARLY MEMBERSHIP                     |                      |  |                          |  |
| ☐ \$15.00 (Individual)                | \$20.00 <i>(</i>     | Family)                                      | ☐ \$5.00 (Student)       |  |
| <del>_</del>                          |                      |  | rho do not live at Atlan |  |
|                                       | <del>-</del>         | her Beaches                                  | Watch efforts to enrich  |  |
| \$10 \$35                             | \$100                | Other:                                       | \$                       |  |
| TOTAL ENCLOSED (Me                    | mbership+Donatio     | n): \$                                       |                          |  |
| FORM OF PAYMENT:                      | ☐ Cash               | ☐ Check                                      | : #                      |  |
| _                                     |                      | •  | ny time and talent as    |  |
| ☐ Board Member                        | ☐ Member             | ☐ Membership Committee                       |                          |  |
| ☐ Programs Committ                    | ee 🔲 Public Ro       | ☐ Public Relations/Communications Assistance |                          |  |
| ☐ Volunteer at Mont☐ Other:           | hly Meetings or oth  | ier Special Evo                              | ents                     |  |

Annual membership (Jan-Dec) is open to all residents of Atlantic, Neptune,

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