



Member Registration / Update Form

Personal Information:

Primary Member _____ Secondary Member _____

DOB _____

DOB _____

Residential Property _____ (secondary household member must have the same
Address _____ address as primary member)

Company _____ Company _____

Occupation _____ Occupation _____

Phone # _____ Phone # _____

email _____ email _____

***Your privacy is very important to us. We will not sell, share or make public
any personal information provided on this form.***

Committees You are Interested in:

HOA / Building Representative

Events

Downtown Access

Communications

Green

Safety

Dues:

\$20.00 Single

\$25.00 Household

\$30.00 Associate

Cash or Check only please

Make Checks payable to **Urban Residents Association**

Annual Memberships expire one year from the date of issue.

Card _____

Board / Committee Member Signature _____

Date _____