

## Application for NERA Membership

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_ (optional)

Membership dues are \$10.00 per family, per year.

You may mail the form to NERA, or bring it with you to a monthly meeting. If you choose to mail the completed form and payment, please send it to:

North End Residents Association  
824 Manhattan Dr.  
Kelowna, B.C.  
V1Y 1H5