

Civic Association of Palisades

www.PalisadesontheSevern.com PalisadesontheSevern@gmail.com

2022 Membership Application / Payment Due- March, 2022

The Civic Association of Palisades (CAP) is open to homeowners or tenants of Palisades on the Severn, Palisades Park, Severn Landing I and II. The annual dues include all persons residing in the household. If there are two distinct households residing in the property (i.e., the owner and a long-term renter), each household must join separately.

Check if you are a: New Member Full Member Associate Member

See below for a general definition of membership types. Complete definitions, as defined in the ByLaws, can be found at palisadesonthesevern.com/documents.

Information is retained in a database. If you do not wish an item to appear in the directory, mark the check box preceding that item. If you wish to be excluded entirely from directory – check here

Name(s): _____

Address: _____

Home Phone: _____ Phone: _____

Add'l Phone: _____ Add'l Phone: _____

*E-Mail Address: _____

*E-Mail Address: _____

In Case of Emergency – Contact Information

Name: _____ Phone: _____

* Please provide Email address for accounting purposes and to stay current with pertinent CAP updates.

1. **New Membership**- Households new to the neighborhood or to CAP membership.
2. **Full Membership** – Households owning property within the boundaries of the Association.
3. **Associate Membership** – Households renting properties or renting apartments in properties within the community.
4. Membership shall include all persons in a household. All applicants are subject to Board of Governors approval

Fees	USD	Paid
CAP Membership	95.00	
Boat Ramp Access	55.00	
Donation		
I would like to volunteer (Please circle yes or no)	Yes	No
Total		

If you are paying for use of the boat ramp please provide the following:

Boat make and registration # : _____ Trailer License Plate #: _____

I have read the CAP Boat Ramp Use Agreement (see guidelines published on blog post and in News at palisadesonthesevern.com for the full agreement) and I agree to its terms.

Signature: _____ Date: _____

Please make check payable to CAP and mail application to:
Civic Association of Palisades, P.O. Box 301, Crownsville, MD 21032