## **Civic Association of Palisades**

| www.PalisadesontheSevern.co  | om PalisadesontheSevern             | @gmail.com          |                     |  |
|--|-------------------------------------|---------------------|---------------------|--|
| 2024 Mem   | bership Application                 |                     |                     |  |
| The Civic Association of Palisades (CAP) is open to homeow                                 |                                     | Severn, Palisades   | Park, Severn        |  |
| Landing I and II. The annual dues include all persons residin                              | -                                   | o distinct househo  | lds residing in the |  |
| property (i.e., the owner and a long-term renter), each hou                                |                                     |                     |                     |  |
| Check if you are a: 📋 New Member 🛛 🗍 Full Me   |                                     |                     |                     |  |
| Please see the CAP Bylaws, published on www.palisadesonth                                  |                                     |                     |                     |  |
| Information is retained in a database. If you do not wish an                               |                                     | ark the check box p | preceding that      |  |
| item. If you wish to be excluded entirely from directory – c<br>Name(s):                   |                                     |                     |                     |  |
|  |                                     |                     |                     |  |
| Address:   |                                     |                     |                     |  |
| Home Phone: Add'l  | Phone:                              |                     |                     |  |
| Add'I Phone:Add'I Phone:   |                                     |                     |                     |  |
| *E-Mail Address:   |                                     |                     |                     |  |
| *E-Mail Address:   |                                     |                     |                     |  |
| In Case of Emergency – Contact Information   |                                     |                     |                     |  |
| Name:  |                                     |                     |                     |  |
| * Please provide Email address for newsletter distril                                      | bution & boat ramp information & L  | ogin to palisadeson | thesevern.com       |  |
|  | Fees                                | USD                 | Paid                |  |
| Volunteer / Donation Opportunities   | 1663                                | 030                 | raiu                |  |
| Check if you can help.   | CAP Membership                      | \$95.00             |                     |  |
|  |                                     | <i></i>             |                     |  |
| With the exception of grass cutting at the<br>community beach, volunteers do all the work. | Boat Ramp Access                    | \$55.00             |                     |  |
| Please look at the CAP website to find out where you can help and let us know via email.   |                                     |                     |                     |  |
|  | Kayak Rack - \$25 per Kayak         | X \$25              |                     |  |
|  |                                     |                     |                     |  |
| Check if you would like to be part of the CAP<br>Project Committee (email required above). | Donation                            |                     |                     |  |
|  |                                     |                     |                     |  |
|  | Total                               |                     |                     |  |
|  |                                     |                     |                     |  |
|  | S ARE SUBJECT TO BOARD OF           |                     |                     |  |
|  | RNORS APPROVAL                      |                     |                     |  |
| Please make check pay  | able to CAP and mail application to | :                   |                     |  |
| <b>Civic Association of Palisades</b>  | , P.O. Box 301, Crownsville         | , MD 21032          |                     |  |
|  |                                     |                     |                     |  |

| If you are paying for use of the boat ramp plea   | ase provide the following:   |  |  |
|---|--|--|--|
| Boat make and registration # :  | Trailer License Plate #:   |  |  |
| I have read the CAP Boat Ramp Use Agreement<br>palisadesonthesevern.com for the full agreement) | t (see guidelines published on blog post and in News at<br>and I agree to its terms. |  |  |
| Signature:  | Date:  |  |  |
|   |  |  |  |

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