

MEMBERSHIP

Davidsonville Area Civic Association

P.O. Box 222, Davidsonville, Maryland, 21035

I would like to be a member of DACA and receive the *Villager*.
Please print this form, complete it, and mail it to
DACA, P.O. BOX 222, Davidsonville, MD 21035 with your check.

At \$5.00 per year for each person, my check for \$_____ is enclosed, payable to DACA, for membership for _____ person/people for _____ year(s). I also include my contribution of \$_____ to DACA to help with the expenses incurred in the effort to maintain the quality of life that brought us to the Davidsonville Area and to help guide the growth and development of our community.

Name(s) _____

E-mail address _____

Postal address _____

Telephone (s) _____ Today's date _____

DACA voting rights and other privileges are available to residents of the Davidsonville Area, which includes parts of Gambrills and Harwood. Click on DACA's Bylaws (www.daca-md.org) to verify if your postal address beyond Davidsonville qualifies.

Addresses outside the Davidsonville Area boundaries are welcome to a non-voting, associate membership.

To save the cost of printing and postage, DACA's bimonthly newsletter, the *Villager*, is distributed by e-mail attachment. Please check here _____ if you prefer to receive it by postal service.

Your comments, your interests?