

HCCA Membership Application

This form is available online with instructions for online payment at:
<http://howardcountyhcca.org/online-membership-form/>



Howard County Citizens Association

Since 1961...

The Voice of the People of Howard County

Section 1: Primary Member Information:

Name: _____ Retiree/Student [Reduced Annual Member Fee] New Member
 Non-Retiree Renewal

Address: _____

Telephone (primary): _____ (other) _____

E-mail: _____

Areas of special interest and/or expertise:

Area	Interest	Expertise	Area	Interest	Expertise
1. Agricultural preservation	<input type="checkbox"/>	<input type="checkbox"/>	8. Parklands, open space	<input type="checkbox"/>	<input type="checkbox"/>
2. Community revitalization	<input type="checkbox"/>	<input type="checkbox"/>	9. Public Health	<input type="checkbox"/>	<input type="checkbox"/>
3. Crime and public safety	<input type="checkbox"/>	<input type="checkbox"/>	10. Public Transportation	<input type="checkbox"/>	<input type="checkbox"/>
4. Education	<input type="checkbox"/>	<input type="checkbox"/>	11. Senior Issues	<input type="checkbox"/>	<input type="checkbox"/>
5. Environmental Issues	<input type="checkbox"/>	<input type="checkbox"/>	12. Smart Growth	<input type="checkbox"/>	<input type="checkbox"/>
6. Historic Preservation	<input type="checkbox"/>	<input type="checkbox"/>	13. Zoning	<input type="checkbox"/>	<input type="checkbox"/>
7. Housing	<input type="checkbox"/>	<input type="checkbox"/>	14. Other: _____	<input type="checkbox"/>	<input type="checkbox"/>

Section 2: Additional Member Information: *If other family members are joining, please provide their information below:*

Name (please print)	Primary Phone	E-mail	Key Area Of Interest

Section 3: Dues. Annual dues are \$20 for individuals/non-retirees and \$10 for retirees, students and additional family members.

Description	Amount
Amount for dues (primary member)	\$ _____
Additional member dues (number joining ____ x \$10)	\$ _____
Additional contribution amount (optional)	\$ _____
Total amount enclosed:	\$ _____

Section 4: Acceptance of Mission Statement (New Members Only)

HCCA MISSION STATEMENT

The Howard County Citizens Association (HCCA) is a non-partisan organization of County residents. Our purpose is to bring residents together to provide them a means of expressing their views on the affairs of Howard County and advancing interests for: exemplary government and delivery of services; sound fiscal policies and responsible administration of public funds; orderly growth and development in the best interests of its residents and the environment; educational system excellence; preservation of agricultural, historical, and open space

Membership in HCCA is open to all Howard County residents who accept HCCA's mission statement.

I/we accept the above mission statement as a condition of my /our membership(s).

Signature: _____

If submitting this form online, or registering multiple family members, please check this box to indicate acceptance of the mission statement by all persons registering.

Section 5: How did you hear about us?

Internet Search Friend/Colleague Blog Newspaper/ Online Article Event Listserv Other

Don't forget to join the HCCA online discussion group list serv at: <http://groups.yahoo.com/group/howard-citizen>