

2024 NEW MEMBER FORM – RESIDENT/HOUSEHOLD MEMBERSHIP

Please complete the form below and email it to megan@westown.org. Once we've reviewed your application, we will follow up with an invoice for the appropriate member category.

RESIDENT/HOUSEHOLD MEMBERSHIP

MAILING ADDRESS

CITY

STATE

ZIP

The contacts you provide will receive Westown correspondences such as our newsletters, event updates and invitations.

MAIN CONTACT

PHONE NUMBER

EMAIL ADDRESS

SECONDARY CONTACT

PHONE NUMBER

EMAIL ADDRESS

How were you introduced to Westown Association?

- Attended an event/meeting of the organization
- News coverage
- Social media
- Recruited by Westown staff/board member: _____
- Referred by another member: _____
- Other: _____