

NORA-NORTHSIDE COMMUNITY
COUNCIL, INC.



MEMBERSHIP APPLICATION

www.noracouncil.org

Name: _____

Address: _____

_____ Zip code: _____

Phone: _____ Home / Cell / Office

Email: _____

Membership Level

____ Family (\$15)

____ Church / Service Organization / Non-profit (\$25)

____ Business / Professional (\$50)

____ Contributor (lives outside NCC area) Amount: _____

____ Contribution to 86th Street Beautification Fund Amount: _____

Special interests, community concerns, talents, or other comments:

Send this form and your check to:

Nora-Northside Community Council, Inc.

P.O. Box 40324

Indianapolis, IN 46240