

MEMBERSHIP FORM
Maplewood Citizens Association

Name _____

Address _____

Phone _____

Email _____

CHECK ONE: New Member _____ *Renewal* _____

Today's Date _____

Dues are \$25 for one year, payable by check to "Maplewood Citizens Association".

***Please send your completed membership form
and check to:***

***Hugh Barteman, Treasurer
MCA
P.O. Box 2483
Kensington, MD 20891-2483***