



OHIO CITY INCORPORATED MEMBERSHIP FORM INSTRUCTIONS

April 17, 2014 - April 15, 2015 Membership Cycle

Become a member of Ohio City Incorporated and be eligible to vote at the 2015 Annual Elections! This form should be filled out by each resident, business, or institution interested in becoming an Ohio City Incorporated member on or before **Wednesday, April 15, 2015**. You may also visit www.ohiocity.org to fill out this form online.

To be eligible for membership, you must be:

- At least 18 years of age or older,
- A resident of Ohio City OR representing an Ohio City business or institution

Please submit one form for each individual. For avoidance of doubt, a resident member who also qualifies as a business or institution member shall be entitled to one vote as a resident member and one vote as a business/institution member. Therefore no one person shall be entitled to more than two votes.

Associate Memberships are available for those who are ineligible for resident, business, or institution memberships. Associate members are non-voting members.

*If you are unsure if you need to complete this form, or would like to confirm the status of your membership, please contact Cynthia Connolly at Ohio City Incorporated:
(216) 781-3222 x 111 - cconnolly@ohiocity.org*

Please Submit your membership form if either of these apply:

1. This is your first time registering as a member of Ohio City Incorporated; or
2. You were previously a member of Ohio City Incorporated, but your membership expired prior to April 16, 2014.

Return completed form via mail, fax, or email on or before Wednesday, April 15, 2015:

ATTN: Cynthia Connolly
Ohio City Incorporated
2525 Market Avenue, Suite A
Cleveland, Ohio 44113
email: cconnolly@ohiocity.org
fax: (216) 781-3252



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Membership Status

check only one:

- ☐ New Membership
☐ Renewal membership

Membership Type

check only one:

- ☐ Resident Member
☐ Business Member
☐ Institution Member
☐ Associate Member

Membership Donation

*membership donations are not required
donations are tax deductible*

- ☐ \$200 (receive an Ohio City flag - \$150 tax deductible)
☐ \$100
☐ \$75
☐ \$50
☐ \$25
☐ Other Amount: _____
☐ I am unable to support Ohio City Incorporated at this time

Checks payable to: *Ohio City Incorporated*

Payment by phone: (216) 781-3222 x 111

Payment Online: www.ohiocity.org/support

**Return completed form via mail, fax, or
email on or before
April 15, 2015**

ATTN: Cynthia Connolly
Ohio City Incorporated
2525 Market Avenue, Suite A
Cleveland, Ohio 44113

Email: cconnolly@ohiocity.org

Fax: (216) 781-3252

Resident/Associate Member Information:

Name: _____

Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

(we do not share your phone & email)

Signature

Date

Business/Institution Member Information:

Business/Org: _____

Representative Name: _____

Address: _____ Suite: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

(we do not share your phone & email)

Signature of Representative

Date

Signature of Business Owner (if different)

Date

For Office Use Only:

Rcvd:

Ck Ph O Cash

Entered:

Ck#:

Amt:

Ltr Sent:

Ck Date:

Ref#: