

Cascade Shores Homeowners Association
Membership Application for April 1, 2011 – March 31, 2012
Dues are due April 1st. Allow 7 days for processing.
See us at www.cascadeshores.org

OWNERS NAMES: _____

CASCADE SHORES ADDRESS: _____

PHONE #: _____ **Out of Area #:** _____

MAILING ADDRESS _____
(If different than above) _____

DO YOU WANT TO BE INCLUDED IN THE CSHA DIRECTORY? YES _____ NO _____

EMAIL: _____ Include it in the Directory? YES _____ NO _____

RENTAL PROPERTY (If Applicable)

RENTER MEMBERS NAMES: _____

CASCADE SHORES ADDRESS: _____

MAILING ADDRESS _____
(If different than above) _____

DO YOU WANT TO BE INCLUDED IN THE CSHA DIRECTORY? YES _____ NO _____

EMAIL: _____ Include it in the Directory? YES _____ NO _____

Please choose ONE of the following memberships:

(Amount prorated *one time only* for New Members joining after June 30th)

Basic Membership (\$100/year)

OR Enhanced Membership (\$150/year): \$ _____

VOLUNTARY DONATION (any amount you add to your membership
is much appreciated): \$ _____

Enclosed Cash or Check made out to C.S.H.A. Total: \$ _____

Mail to: CSHA, 16528 Pasquale Rd., Nevada City, CA 95959

Rates are never prorated and remain the same for the stated 12-month period.

Please, would you like to help or donate your time to a CSHA event? Someone will call you.

Name: _____ **Phone:** _____

For CSHA USE ONLY: CARD ISSUED: _____ DATE JOINED: _____