



Connecting our Neighborhoods

## Membership Registration Form

Date:

Name of Association

### Association Officers

President:

Address

Email:

Phone:

Vice President:

Email:

Phone:

Secretary:

Email:

Phone:

Treasurer:

Email:

Phone:

Representative to SCC:

Email:

Phone:

Is your Association responsible for any common areas?

*To register your association, please provide the information requested and return this form with a \$25.00 check payable to:*

*Southfield Community Coalition*

*PO Box 162*

*Southfield, MI 48037-0162*