

MEMBERSHIP APPLICATION

To enroll in your Association please print, complete and mail this form with a \$30 check per household (annual dues) payable to "*Dolphin Cove Community Association*" to Justin Sencer, 24 Dolphin Blvd. Or drop it off at our community meetings

Name (s) _____

Street Address _____

Phone _____ Email _____

How long have you been a Dolphin Cove resident? _____

Are you willing to volunteer for (circle choice):

Street Coordinator Yes | No | Not Sure

Welcoming Committee Yes | No | Not Sure

Special Events Yes | No | Not Sure

Other Capacity _____

*All members personal information will be kept private. We will not share your email address with other members or others. Personal information will not be posted on this site without your consent.

Application last edited on December 11, 2019