

Estates West Homeowners Association (EWHA)
MEMBERSHIP APPLICATION

New Member **Renewal**

Please print your information below.

Last Name: _____

First Name(s): _____

Child(ren)/Age(s): _____

Street Address: _____

Home Phone: _____

May we print your name and address in the EWHA Directory? Yes No

May we print your phone number in the EWHA Directory? Yes No

Would you like to receive EWHA News updates via email? Yes No

Would you like to receive EWHA Crime Watch updates via email? Yes No

Email Address: _____

Volunteer Areas of Interest:

- | | |
|--|---|
| <input type="checkbox"/> Beautification | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Safety |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Social Activities (adult) |
| <input type="checkbox"/> Holiday Decorations | <input type="checkbox"/> Social Activities (children) |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Other _____ |

Annual Dues: \$30

Please mail application and check made payable to **EWHA** to:

Sheila Hettler
7736 Alto Caro Drive
Dallas, TX 75248

Thank you for your support!