



Capitol Neighborhoods, Inc.
Box 2613
Madison, WI 53701-2613

Household Membership

Household Information

Address 1 _____

Address 2 _____

City _____ State _____ Zip _____

Phone _____

Member 1

First Name _____ Last Name _____

Work Phone _____ Mobile Phone _____

Email _____

Member 2

First Name _____ Last Name _____

Work Phone _____ Mobile Phone _____

Email _____

For additional members, use another form or continue on the back of this sheet.

On occasion, Capitol Neighborhoods has made its mailing list commercially available to those we feel assist the neighborhood. Check the box if you do not wish to receive these mailings.

Household memberships begin at \$30 per year for two members. Add \$10 for each additional member. Please consider making an additional donation to Capitol Neighborhoods.

Number of members _____ Member dues amount \$ _____

Additional donation \$ _____

Check amount \$ _____

Mail this form with your check made payable to:

Capitol Neighborhoods, Inc.

Box 2613

Madison, WI 53701-2613

Capitol Neighborhoods is a 501(c)(3) organization. All member dues and donations are tax deductible.