



MEMBERSHIP APPLICATION
Carleton Heights and Area Residents Association (CHARA)
Resident () * Business ()

Date:

Contact information: (please print)

Name:

Mailing address:

E-mail address:

Telephone:

Website URL (if applicable):

Annual Membership: FREE

I am over the age of 18. ()

* We are happy to advertise your business on our website.

* Please E-mail us : info@ourchara.ca

www.ourchara.ca

By-Laws: 1.01, 2.01, 2.03, 2.04 and 4.0