

Southwood Neighborhood Association Membership Application

Family (last) Name:		Date:	
Street Address:		Annual Dues \$30.00	
City, State, Zip:			
Contact Preference:	Phone <input type="checkbox"/> Postal <input type="checkbox"/> E-mail <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Ph. #	E-mail:	Willing to serve as an Officer or Volunteer	
Resident:	Owner <input type="checkbox"/> Non-Owner <input type="checkbox"/>		
Head of Household:	First Name: _____ Mid. Initial _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Spouse/Partner:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Children and Ages: (name and age of children is optional)			
		Subdivision	
Applicants Signature:		BLK #	LOT #

Gray zones for office use only.

Mail to: SNA, 9154 E. 114th St., Bixby, OK 74008