

CIVIC ASSOCIATION OF HOLLIN HILLS

For CAHH Use Only
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2009 - 2010 Membership Form



* Membership in the Civic Association of Hollin Hills is open to residents of the Hollin Hills community. Please support the Association by joining or renewing your annual membership in the CAHH.

Name _____
 Street _____ City/State/Zip _____
 Phone _____ E-mail (important for CAHH communications) _____

1. **Status:** Current member New member Non-resident Bulletin Subscriber Directory listing only (no charge)

2. **Dues: \$100 per year per household.** Make check payable to CAHH and
 Send with completed form to: CAHH Membership
 1600 Paul Spring Rd., Alexandria, VA 22307

*The membership year is May 1 to April 30.

Dues (\$100)	\$ <u>100</u>
Add'l Parks Donation	\$ _____
Non-resident Bulletin Subscription (\$24)	\$ _____
Postage if outside U.S.	\$ _____
TOTAL ENCLOSED	\$ _____

3. **Hollin Hills Neighborhood Watch Program**, conducted in conjunction with the Fairfax County Police, needs VOLUNTEERS. If you are NOT already participating, please list those in your household interested in participating:
 Name(s) _____

Regular schedule Occasionally

4. **Other Hollin Hills Activities:** For information about local activities visit the HH directory or www.hollinhills.org.

- | | | | |
|----------------------|----------------------------------|---|------------------------------|
| - Babysitting Coop | - 4 th of July Picnic | -HH Swim Club | -“The Network” Singles Group |
| -Book Club | -French Club | -HH Tennis Club | -HH Green Club |
| -Bulletin Staff | -Garden Club | -HM Swim & Tennis Club | -Parks Committee |
| -Directory Committee | -Gourmet Dinner Club | -Membership/Greeter | -Winter Potluck |
| -Design Review Comm. | -Hollin Hills Helping Hands | -Mt. Vernon Council of Civic Associations | |

5. **DIRECTORY LISTING:** Please review your current Directory listing and check the appropriate box.

No changes to current listing. (Note: IF THERE ARE NO CHANGES, DO NOT FILL IN BOX BELOW.)

***What year did you first move to Hollin Hills?** _____ (Note: This is a new item to be listed in the HH Directory.)

Change listing as shown in box below.

New member not in current Directory; include in next Directory as shown below.

First Name _____	Last Name _____	and	2 nd First Name _____	2 nd Last Name (if desired) _____
Address _____		City/State/Zip (If NOT in Hollin Hills) _____		
Home Phone 1 _____	Home Phone 2 _____	E-mail 1 _____	E-mail 2 (if desired) _____	
CHILDREN 18 YEARS OLD AND YOUNGER:				
Name _____	Birthdate M / D / Y / /	School _____	Name _____	School _____
_____	/ /	_____	M / D / Y / /	_____
_____	/ /	_____	/ /	_____
Additional listing for adult with last name different from 1 st or 2 nd last name shown above.				
First Name _____	Last Name _____	Phone number _____		