The Mantua Civic Association

Annual Membership Application 2020-2022

Join the Mantua Civic Association and make a positive contribution to your community.

Membership (Please circle one)

New Member	F	Renewal	Associate Member
Contact Information: (Please print clearly) Name:			
Home Address: (Please include your street address if you use a post office address)			
Phone #: Home:	Work:		Cell:
Email:			
Signature		Date:	
Membership Categories: (Please circle the appropriate membership category.)			
Full Member	4	Associate Member	
Individual Resident\$15		Non-resident\$30	
Senior\$10 (62 and older)		Business/Organization\$	35
Student/Youth\$ 10 (ages 14-22	1)	Faith-based\$35	
\$5.00 discount with 2 ye	ears paid membersh	ip Amoun	t Paid
Member Interest: What Advisory	y Committee would y	ou be interested in?	(Circle all that apply)
Communication	Membership & Ou	treach	Seniors
Education & Youth	Zoning & Planning	5	Enrichment
What are your most important concerns?			
Please make checks or money orders payable to Mantua Civic Association (MCA) and mail to:			
Mantua Civic Association (MCA)			

PO Box 7701 Philadelphia, PA 19104 267-227-9045

mantuacivic@gmail.org

The MCA does not and shall not discriminate based on race, color, religion, gender, age, national origin, disability, marital status, sexual orientation, or military status, in any of its activities or operations. These activities include, but are not limited to the selection of volunteers, association membership, and provision of services. **Updated June 2017**