

Name	Email	Phone	
A. Inte	rests/ Concerns with the neighborhood.		
Please mark	ket a number value that corresponds with leve	I of interest or concern # 1-8	
And circle o	r highlight any answers to questions or areas	of particular interest or concern)	
Beautific	cation/Green Space/Neighborhood Cleanliness	s/Gardening	
Crime/S	afety/Neighborhood Watch		
Recreati	onal/ Cultural Activities		
Busines	ses (are you a business owner Yes/No?)		
Housing	- (Are you a home owner or renter?) code er	forcement-Derelict properties	
Commu	nity Resources/ Farmer's Market/ Tool Library		
UB (Are	you an alumni? A student? An employee?)		
OTHER			
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B. Would you be willing to serve on a committee concerning the topic of your highest interests?

C. <u>Do you have any interests or skills that you could contribute to our neighborhood? (for example: web design/home improvement/ gardening/writing-newsletter-website-blog)</u>



## MEMBERSHIP FORM www.ourheights.org

Date

Name

Address

City Zip Code

**Phone Number** 

Cell Number Place of Employment

Name of Block CLUB, Business or organization

E-Mail

Are you interested in having neighborhood watch training with your neighbors given by a police officer? Y / N. The UHC will coordinate the training for you.