**2016 Membership Application - Resident**

Thank you for your continued support and involvement with OTMRA. Please fill out the following 2016 resident membership application *in full* and submit with payment. This membership is valid through January 31st, 2017.

***Note(s)****: It is organizational policy to keep private the names and personal contact information of members*

**1520 N. Wells – Lower Level • Chicago, IL 60610 • 312-951-6106(p) • 312-951-9427(f) • otmra@oldtownchicago.org**

**Please select a payment method:**

*All applications (including payment) should be mailed to:****OTMRA, 1520 N. Wells – Lower Level, Chicago, IL 60610*** *or**faxed to* ***312-951-9427*** *or emailed to* ***otmra@oldtownchicago.org***

**Check or Money Order** (UMake payable toU: Old Town Merchants & Residents Association)  
**PayPal Online** (VisitU [www.oldtownchicago.org/membership](http://www.oldtownchicago.org/membership) to pay online)  
**Credit Card** (you MUST fill out all the information below):Visa MasterCard American Express   
Name (on card) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Card Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date \_\_\_\_\_\_\_\_\_

Billing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit Card #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp \_\_\_\_\_/\_\_\_\_\_ CCID (code on back of card) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Resident Membership Information:**

Please check box: **Residential, 1-year – $50**

**Resident Name(s)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Zip** \_\_\_\_\_\_\_\_\_\_

**Preferred Phone ­Number**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Preferred E-mail** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Favorite Old Town Businesses (Past or Present) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What are your Thoughts on Old Town (in 25 words or less)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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***Content Contributors*** *are creative Old Town resident members who will be tasked with producing original articles, reviews, photos or videos for use on the website to supplement our own efforts.*Are you interested in serving as a **Content Contributor** for the Old Town website?  **Yes**  **No*****Historians*** *will be asked to occasionally provide editorials or articles about the history of Old Town for online/print.*Are you interested in serving as an **Historian**?  **Yes**  **No**