



SJRHOA MEMBERSHIP APPLICATION

**St. Joseph River Home Owners Association
P.O. Box 1131 Mishawaka, IN 46546**

Date: _____

Last Name: _____

Middle Initial: _____ First Name: _____

Street Address: _____

P.O. Box (If any): _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Work Phone: _____

Fax No: _____

E-Mail: _____

For SJRHOA use only	
Association dues:	_____
Accessories:	_____
Date:	Total: _____

Class A Membership is open to any individual or family who owns property on the St. Joseph River between the Twin Branch Dam and the Hwy 19 Bypass in Elkhart County and has been accepted into membership. One vote per membership.

Class B Membership shall be open to any individual or family that has reasonable connection to or use of the river.

The dues of the SJRHOA shall be \$25.00 per year per membership. Dues are payable upon joining and thereafter, annually on October 1 of each year. Dues must be paid by December 31.

Membership Agreement and Release

Consistent with my desire to take personal responsibility for my conduct, individually and as a member of the SJRHOA, I agree to abide by the principles contained in the SJRHOA By-Laws. I will refrain from any form of discrimination, harassment, derogatory, illegal, or unethical conduct, and I understand that if I engage in such conduct, I may be responsible to reimburse SJRHOA, or any individuals involved with SJRHOA, for any damages, losses, or costs resulting from my conduct. Understanding that SJRHOA programs are conducted by volunteers who cannot be effectively screened or supervised by SJRHOA, I release and discharge SJRHOA, governing bodies and representatives from any liability for the intentional or negligent acts or omissions of any member or officer of SJRHOA.

By submitting this application, I agree to the collection, use and processing of the personal information I provide to SJRHOA for the purposes of organization administration, payment of my dues, and inclusion of my contact information in a members' directory that will be distributed to members and employees of SJRHOA. I agree to notify SJRHOA of any change to my personal information, including making any requests to check, delete or correct my personal information, so that it is accurate and current. I understand that the majority of the data requested in this application is necessary for administrative and planning purposes, and that the failure to provide this information may prevent my application from being properly processed or inclusion of my contact information in the members' directory.