



Membership Form

Date _____

Name _____

Address _____

E-mail _____

Dues \$40 Donation \$ _____ Total \$ _____

Please make check payable to:

The Sauganash Community Association

Please mail to:

North Shore Community Bank

Attn: SCA

4343 W. Peterson Ave.

Chicago, IL 60646

To pay by cash, please visit North Shore Community Bank

Thank You for Supporting the Sauganash Community Association