

**Residents Alliance for a Quality Lifestyle
Residents Serving Residents**

Membership Application

Yes, I would like to be a member of the Residents Alliance.
I am enclosing my check for the \$50.00 membership dues. This
allows my household to have full voting rights (one vote per household)
for one year.

Please make check payable to "Residents Alliance"

Name _____

Address _____

PP Neighborhood(i.e.Avila,etc) _____

Phone _____

E-mail Address _____

**Please mail or drop off in Portofino (box on front porch on chair) form
and check to:**

**Tish Fiamingo
9933 Bella Vista Court (PORTOFINO)
Fort Myers FL 33913
570-404-2192**

Questions? Contact Membership Chairs at:

Steve Scavone: 1-860-302-0088

Ken Hauer: 1-309-369-3354

ra.member1@gmail.com

www.residentsalliance.org