



**Indian Village Community Association, Inc.**

2214 Wawonaissa Trail \* Fort Wayne, IN 46809

260-747-7141

**Application for IVCA 2016 Membership**

Please complete this Application for Membership into Indian Village Community Association, Inc., and drop it off (or mail) to 2214 Wawonaissa Trail, email it to secretary@indianvillagefw.com, or fax it to 267-613-0244 (267 is the correct area code, please don't change it to 260)

Date: \_\_\_\_/\_\_\_\_/2016

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

Please include my information in the Resident Directory  Yes  No

By signing below, I authorize the IVCA Board of Directors to bill me for 2016 annual membership dues in the amount of \$30. I understand that my membership must be renewed annually, until IVCA comes together as one complete neighborhood, with Protective Covenants recorded in the Allen County Recorders Office.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

It is discretionary for the Board of Directors to approve or deny your application. When you receive an invoice for dues, that will be notification that your application has been accepted.

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***For IVCA Board of Directors Use:***

Application:  Approved  Denied

Date Invoiced for Dues: \_\_\_\_/\_\_\_\_/2016

Date Dues Paid: \_\_\_\_/\_\_\_\_/2016

Amount: \$\_\_\_\_\_.\_\_\_\_ NBC Donation: \$\_\_\_\_\_.\_\_\_\_\_

Paid by:  Check  Cashiers Check  Money Order  Cash

Check # \_\_\_\_\_