

ASSOCIATE MEMBERSHIP APPLICATION

BRAAC Airport Action Coalition
(A New Jersey Non-Profit Corporation)
www.BRAAC.org

Applicant:
Name _____

Street: _____

Town: _____ State: _____ Zip: _____

Telephone: Home _____ Cell _____

E-Mail _____
(please provide your email address so we can keep you informed)

Statement:

I hereby apply for an Associate Membership in the BRAAC Airport Action Coalition. By this application I certify that I subscribe to the mission, which is to educate the citizens of Readington and Branchburg Townships as to the impact of the expansion and operation of local airports on municipal infrastructure, quality of life, taxes, and property values in Readington and Branchburg Townships. I understand that my membership will be subject to approval by the Board of Directors.

Signature _____ Date _____

Membership Dues: \$5.00 per annum

BRAAC Airport Action Coalition membership dues are only \$5.00 so that everyone can join. However, we are an all-volunteer organization and we rely on contributions to finance our educational mission. Please consider an additional donation to help us fund mailings to educate residents on airport issues. Donations to BRAAC Airport Action Coalition are not tax-deductible.

Membership Dues: \$5.00 Make checks out to BRAAC Airport Action Coalition.

Additional Contribution: \$25 \$50 \$100 \$250 \$500 Other: _____

I have time to help. Please contact me.

Mail to:
BRAAC Airport Action Coalition
P.O. Box 233
Three Bridges, New Jersey 08887