

MABLETON IMPROVEMENT COALITION MEMBERSHIP FORM

If mailing, please send completed form and check to:

Mableton Improvement Coalition, PO Box 491, Mableton, GA 30126

Member ID): Type	: Lifetime Active	Associate	
Date:	Cash:	Check:	By:	
For MIC Use			•••••	
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Signature			Date	
Associ	ate (all others, non-vot year(s) at \$1	\$		
Annua	l (live/own residential p year(s) at \$1	\$		
Lifetim	ne (live/own residential	\$100		
(All members i	must be 18 or older.)			