Indian Woods Community Association
Member Request

Drop Off or Mail to:

IWCA
c/o Board of Directors
5245 West Ardmore Ave.
Chicago, Illinois 60646-6520

Print or Type - Please complete All Information On This Form
Uncompleted Member Request Forms Will NOT Be Processed or Acted Upon
If You Have Any Questions – Call Your IWCA Area Representative

Description of Issue or Topic:

☐ Comment ☐ Suggestion ☐ Idea ☐ Item for Newsletter ☐ Complaint ☐ Commendation

☐ Other: _____

☐ Would Like Placed on the Next General Meeting Agenda ☐ Would Like Placed in the Community News Newsletter

Issue or Topic:

Your Recommendation / Suggestion / to Address Your Issue/Topic:

Name (1) - (First, MI, Last)

Address

City	State	Zip

Telephone Number
1 – [ ] -
Area Code

Cell Telephone Number
1 – [ ] -
Area Code

E-Mail Address
_____ @ _____ . _____

What Is The Best Way To Contact You:

☐ E-mail ☐ Telephone Call ☐ Newsletter ☐ U.S. Mail ☐ Other: _____

Signature of Applicant	Date
(X)	

ASSOCIATION USE ONLY:

Action Taken:	Date Received: