

Membership Application

2024-2025



12-Month Membership Begins: January 1 April 1 July 1 October 1

Membership Application Date: _____ I'm applying for: New Membership or Membership Renewal

Last Name/Business Name: _____ FirstName/Contact: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Primary Phone #: _____ Primary Email: _____

Secondary Phone #: _____ Secondary Email: _____

Annual Membership Dues (please mark one):

\$25 Individual Membership

\$50 Family (covers all persons in household over 18 years of age- please list all eligible family members)

\$100 Business Membership

Please contact me about the free Business Spotlight Benefit

Exempt from membership dues: I reside in an SJCLT rental or ownership home

Annual Subscription Fee (please mark one)

Please provide all SJCLT communications by email (no fee for this option). You may change this designation by written or email correspondence to contact@saintjosephclt.org.

Please mail all SJCLT communications (please enclose \$5.00 for this option)

Please mail all SJCLT communications but I request exemption from fee due to financial hardship

Donations (donations are optional but are very much appreciated)

Wherever funds are needed the most \$ _____

Revolving Acquisition/Predevelopment Fund \$ _____

TAHOE (Tahoe Affordable Home Ownership Enabling) Program \$ _____

Motel to Housing Grant Program \$ _____ Emergency Grant Program \$ _____

If you have any questions about these programs check out our website: www.saintjosephclt.org
or email us at contact@saintjosephclt.org

Please return this form with payment to St. Joseph CLT, PO Box 12032, Zephyr Cove, NV 89448
Checks should be made payable to St. Joseph CLT. Payments may also be made on our website using PayPal.

Thank you very much for your support of SJCLT's efforts to expand and preserve permanently affordable homes...and more, for Tahoe Basin's low- and moderate-income households