

## NESKOWIN CPAC MEMBERSHIP FORM

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Date: \_\_\_\_\_

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

Do you own property, reside in, or own or operate a business in the Neskowin Watershed?  
(Please identify which of the above criterion you qualify for:)

\_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

**Please fill out and return the completed form to the Neskowin CPAC Secretary at one of the following addresses:**

**Email to [dcm@aterwynne.com](mailto:dcm@aterwynne.com) (by pdf)**

**Fax to (503) 226-0079**

**Mail to:**

***Douglas C. MacCourt***

**Ater Wynne LLP**

**1331 NW Lovejoy Street, Ste. 900**

**Portland, OR 97209**

**Or you may bring the completed form to any regularly scheduled Neskowin CPAC meeting.**

(Feel free to duplicate this form to circulate it to those residing, owning property, or owning or operating a business within the boundaries of the Neskowin Watershed.)