



**MARCO ISLAND CIVIC ASSOCIATION - RESIDENTS' BEACH**

1770 San Marco Road #204, Marco Island, FL 34145

Phone: 239-642-7778 www.marcocivic.com

**APPLICATION FOR MEMBERSHIP MICA - RESIDENTS' BEACH**

**For Improved Residential Property Owners September 1, 2023 – August 31, 2024**

Please print legibly

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

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

\_\_\_\_\_

IMPROVED MARCO RESIDENTIAL PROPERTY ADDRESS \_\_\_\_\_

Application fee for my non-transferable MICA Residents' Beach membership is \$200. Fee is not prorated or refundable. Payment via check, debit/credit card or cash in MICA office or apply online [www.marcocivic.com](http://www.marcocivic.com) and pay with credit card.

I certify that I am a Marco Island resident, and in support of this application, I AM SUBMITTING HEREWITH PROOF that I qualify for membership by including a legible copy of **one of the following** CURRENT DOCUMENTS in my name\* for my improved residential dwelling on Marco Island showing the street address.

- Proposed tax statement, property tax bill, or homestead exemption statement OR
- Homeowner's, wind or flood insurance declaration page OR
- Condominium maintenance fee statement OR
- **New property owners:** warranty deed or closing statement

\*If the property is in the name of a corporation, trust, LLC, etc., please ALSO supply documentation tying you to the entity.

**ONLY THE ABOVE DOCUMENTS WILL BE CONSIDERED AS ACCEPTABLE PROOF OF RESIDENCY.**

I understand that: 1) Residents' Beach membership will be granted only to natural persons (not corporations or trusts); 2) not more than one membership will be issued to any resident; 3) membership is non-transferable; 4) my picture will be taken at the MICA office and an ID will be issued for my use only; 5) members are required to present photo identification to MICA representatives upon request; 6) there is no refund of fees; 7) the fee to replace an ID card is \$30.00; 8) by supplying my email address, I authorize MICA to email me information. As a member of the Marco Island Residents' Beach, I waive for myself and any of my guests any cause of action that may arise for damages of any kind and matter. I understand that any violation of membership rules and beach access regulations will be grounds for cancellation of my membership. Under penalties of perjury, I declare that I have read the foregoing application and that the facts stated in it are true.

\_\_\_\_\_  
Date Signature of Applicant Cell #: \_\_\_\_\_

Email address: \_\_\_\_\_

Other Email address: \_\_\_\_\_ Other Cell #: \_\_\_\_\_