



City of Las Cruces

IDENTIFIED NEIGHBORHOOD ASSOCIATION

Name of Association: _____

Contact information for two (2) representatives
(Note: Contact information will be made public)

Name: _____

Phone(s): _____

E-mail address: _____

Mailing address: _____

Name: _____

Phone(s): _____

E-mail address: _____

Mailing address: _____

Geographic boundary of Association (a map may be substituted for written boundaries):

North: _____ South: _____

East: _____ West: _____

Subdivision name or other identifier: _____

Please attach a copy of the Association's current by-laws. The by-laws must reference purpose of organization, membership qualifications, and provisions for membership meetings.

Submit registration to:

City of Las Cruces, Community Liaison
PO Box 20000, Las Cruces NM 88004
or at City Hall, 700 N. Main St. Suite 3600
or Jamey Rickman, Community Liaison, at jrickman@las-cruces.org