Dove Tree Associate Membership Form

Name of Applicant:		
Spouses Name:		
Date of Birth:	Number of people in Hou	sehold:
Street Address:		
City:	State:	
Phone:	Mobile:	
Child 1:		Age:
Child 2:		Age:
Child 3:		Age:
Child 4:		Age:
Reference Name:	Phon	e:
Previous Member with Dove Tro	ee: If yes ,last yea	or of membership
2024 membership dues are \$50	00. New membership applications acce	epted starting April 1, 2024.
Mail a check and a copy of app	lication to: Dove Tree, Inc. PO Box 26	085, Greenville, SC 29616.
Dove Tree will email you once y	ou application is accepted. 2 emails a	re needed for the pool gate
system. Each membership gets	2 virtual Fobs and 1 physical Fob with	membership. Addition Fobs
can be purchased from the boa	rd.	

Please email a copy of this application to DoveTreeHOABoard@gmail.com to expedite the process.