

SILVER LAKE ASSOCIATION OF MADISON

MEMBERSHIP APPLICATION/RENEWAL

NAME: _____

EMAIL: _____ (IMPORTANT)

WINTER ADDRESS: _____

TELEPHONE: () _____

SUMMER ADDRESS: _____

TELEPHONE: () _____

I AM WILLING TO HELP WITH:

BOAT INSPECTION WEED WATCHING WATER MONITORING

NEWSLETTER OTHER _____

PLEASE MAIL WITH YOUR CHECK:

DUES: \$ _____ (\$25 fam/\$15 ind)
DONATION: \$ _____
TOTAL: \$ _____

SILVER LAKE ASSOCIATION OF MADISON
PO BOX 224
SILVER LAKE, NH 03875

ARE YOUR NEIGHBORS MEMBERS?