

Star Lake Property Owners' Association, Inc.

P.O. Box 155, Dent, MN 56528

2018-19* Membership Information Form

(New _____ or Renewal _____)

**Please note: SLPOA Membership runs from Annual Meeting to Annual Meeting.*

PLEASE PRINT

Name(s): _____ Date: _____

Legal Mailing Address: _____

Star Lake Street Address (if different): _____

Email Address **: _____ Phone(s): _____

**Please consider providing your email address – it will help reduce costs. Email addresses will not be sold or given to others, and will not appear in our directory without your written permission.

I/we certify that we **ARE** **ARE NOT** Star Lake property owners.

- Dues: \$25 -**Star Lake Property Owner: Individual, Family, Corporation, Partnership. (Voting Membership)**
 \$20 -**Associate Member: Non-Property Owner supporting the objectives of The Association. (Non-voting Membership)**
 \$_____ **Lake Protection Fund Donation. Consider making an additional donation to help us protect the interests of Star Lake.**

I am interested in volunteering in Association activities as follows:

 1. I/we would be interested in working on the following SLPOA Projects:

- | | |
|---|---|
| <u> </u> a. Water Testing | e. <u> </u> Adopt A Highway Project |
| <u> </u> b. AIS Monitoring | f. <u> </u> Protect the Lake Project |
| <u> </u> c. Membership & Publicity | g. <u> </u> Volunteer Coordinator |
| <u> </u> d. Water Safety (Buoy placements) | |

 2. I am interested in serving on the board of Directors.

 3. I want to be a member, but prefer not to volunteer at this time.

Ideas or comments for the board of directors: _____

USE BACK OF FORM IF NECESSARY

This authorizes the Star Lake Property Owners Association to utilize my/our email address for official SLPOA communications.

Signature(s) _____ Date _____

PLEASE COMPLETE THIS FORM & MAIL WITH DUES PAYMENT TO THE **SLPOA, P.O.BOX 155, DENT, MN 56528.** It would be greatly appreciated if dues were paid by mail PRIOR TO the Annual Meeting. Thank You.