

FRIENDS OF POOL 2 MEMBERSHIP APPLICATION

To become a member of FRIENDS OF POOL 2, please fill out the following information.

Name _____

Street Address _____

PLEASE PRINT

City, State, Zip _____

Business Name if applicable) _____

Property location (if applicable) _____

Phone number _____ E-mail address _____

How many years have you lived/boated Pool 2? _____ (mandatory)

What is your interest in Pool 2?

Business Owner/Representative

River Property Owner

Recreational Boater

Fisherman/Hunter

Other _____

I would be interested in:

Becoming a Member

Serving on the Board of Directors

Serving on a Committee

I would be willing to volunteer my expertise in _____

I support the Friends of Pool 2 purpose statement in Article I, Section 2.

Signature _____ Date _____

My check is enclosed in the amount of \$ _____ for: (please check all that apply)

1 year membership (\$25) 2 year membership (\$50) Donation

Please mail your application and membership fee of \$25 to: Friends of Pool 2, P.O. Box 284, Newport, MN 55055