TEN MILE LAKE ASSOCIATION, INC.

MEMBERSHIP APPLICATION FORM
and
DIRECTORY INFORMATION RECORD

DATE: ____/____/_____

Name:

_____ _____ ___ _____
Last First M.I. Occupation

Spouse or Significant Other:

_____ _____ ___ _____
Last First M.I. Occupation

Dependent Children's Names: _____

Lake Address: _____ Lake Phone: ( ) _____
Hackensack, MN 56452

Other Residence: _____ Phone: ( ) _____

_____

Please indicate the address to be used for TMLA mailings: ___Lake ___Other

Email Address:_____

Annual Dues Payable to the Ten Mile Lake Association: $30.00

Pease send Form and Dues to: Ten Mile Lake Association
P.O. Box 412
Hackensack, MN 56452