Membership Form

| Name: | | |
|-----------------------------------|---------------------------------|-------------------------------------|
| (Please correct as needed) | | |
| Home Address/Phone | Lake Address/Phone | Alternate Address/Phone |
| | | |
| | | |
| | | |
| Lake area | | |
| E-Mail (please print): | | |
| Additional e-mail: | | |
| Additional e-mail: | | |
| I would like to receive my newsle | tter by: Email∟ Hardcopy └ | |
| Sugar Lake Association Annual M | Membership Dues: | \$50.00 |
| Additional Donations: | | |
| Milfoil and Invasive Spec | | |
| | 00 X Number of Acres () = | |
| | 50 | |
| • | 5 | |
| | | |
| | | |
| Lake improvement run | db | |
| | Total: | \$ |
| | | |
| Please return form with | your check payable to Sugar L | ake Association to: |
| Cathy Beckman, S | SLA Membership | |
| 10880 Imhoff Ave | NW, Annandale, MN 55302 | |
| | ssociation is a 501C3 non pro | fit organization. |
| Your gift is tax ded | ductible. | |
| IAMe would like to suppo | ort the Association by voluntee | ring my/our time in the following w |
| (Our volunteer coordinate | | mig my/oar arise in the following w |
| (Sai Tolaineoi Goolainai | o. IIII oomaat joulj | |
| | | |
| Placing and removing buoys | Shoreline planting | Serve on a committee |
| Invasives treatment | Annual picnic | Golf Tournament |
| Water / snow patrol | Monitor lake access | Winter meeting help |
| Serve as an area communicator | Serve on the SLA Board | Work on newsletter |
| 5K Run/Walk | | |