

**CENTER LAKE WOODS
PROPERTY OWNERS ASSOCIATION**

KEEP THIS PART FOR YOUR RECORDS:

YEAR:	2024
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CLWPOA MEMBERSHIP FORM RECEIPT

NAME:

CHECK #:	DATE:			AMOUNT:
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DID YOU RETURN YOUR RAMP KEY?	YES:	NO:
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Separate here
SEND THIS PART BACK:

YEAR:	2024
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MAIL TO:

**CLWPOA
Membership Dues
P.O. BOX 63
CAMP LAKE, WI 53109**

OR hand deliver to

**Candi Peterson
Membership Chairperson**

CLWPOA MEMBERSHIP FORM

MAILING ADDRESS:

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____

<input type="checkbox"/>	\$ 60.00	FAMILY MEMBERSHIP
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<input type="checkbox"/>	\$ 50.00	SENIOR (65) MEMBERSHIP
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<input type="checkbox"/>	CASH DONATIONS
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<input type="checkbox"/>	\$ 200.00	PIER RENTAL
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<input type="checkbox"/>	PIER NUMBER
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<input type="checkbox"/>	\$ 30.00	RAMP KEY
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RETURN OLD KEY?	YES	NO
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<input type="checkbox"/>	\$ 40.00	NEW RAMP KEY
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REC'D NEW KEY ?	YES	NO
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CHECK #:	DATE:	AMT:
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TREASURER:	MEMBERSHIP
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