



APPLICATION FOR MEMBERSHIP / RENEWAL

Name _____

Camp Location _____

Mailing Address _____

City _____

State _____ Zip _____

() _____

() _____

Summer Phone _____

Winter Phone _____

() _____

Cell Phone (if applicable) _____

Email Address _____

I would like to help with (check any/all that apply)

- Loon Preservation Chicken BBQ Lobster Cookout Lake Water Testing
- Milfoil Awareness Other (please describe) _____

Other comments or suggestions _____

Please include \$25 annual membership with this form. Mail completed form along with payment to:

Bow Lake Camp Owners Association
c/o Bernhard Metzger
65 Stony Brae Rd
Newton, MA 02461

As always, your support is greatly appreciated!