



APPLICATION FOR MEMBERSHIP / RENEWAL

Name

Property Location

Mailing Address

City State Zip

Summer Phone

Winter Phone

Cell Phone (if applicable)

Email Address

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

Loon Preservation Chicken BBQ Lobster Cookout Lake Water Testing Milfoil Awareness

Other (please describe below)

Other Comments or Suggestions

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

Bow Lake Camp Owners Association
P.O. Box 227
Strafford, NH 03884

As always, your support is greatly appreciated!