|  |
| --- |
| Moosup Pond AssociationP.O. Box 513Moosup, CT 06354 |
| MEMBERSHIP FORM- PLEASE PRINT |
| Name: |
| Email Address: |
| Property address: |
| City: | State: | Zip Code: |
| Mailing Address(if different than property address): |
| City: | State: | Zip Code: |
| MEMBERSHIP FEE |
|  □ VOTING MEMBER: One designated individual, per tax bill,  |
|  who may cast votes at MPA meetings. |
|  Fee: $25 |
|  |
|  □ ASSOCIATE MEMBER: Interested party who does not have  |
|  voting rights but is welcome to contribute at MPA meetings. |
|  Fee: $10 |
|   |
| Consider making a donation to MPA to help fund future projects such as weed control:  |
|  □ VOLUNTARY DONATION:  | $ |
|  |
| PLEASE MAKE CHECKS PAYABLE TO MOOSUP POND ASSOCIATION  |
| Thank you for your support! |
| Signature: | Date: |
| Total Amount Enclosed: | Check Number: |