#  BAY SHORE PROPERTY OWNERS ASSOCIATION

# WEBSITE MEMBERSHIP FORM

In September of 1997 a number of residents formed what is known as the Bay Shore Property Owners Association, Inc. (BSPOA). The purpose of this association is to promote the natural, safe and residential character of the Bay Shore Drive area. Its efforts include monitoring governmental boards and development proposals, speaking out on activities and proposals that affect our residents, and publishing a newsletter.

**The propane program we have with AmeriGas requires all participants to be current members of BSPOA. I would like to join the Propane Program: Yes\_\_\_\_\_\_\_¸ No\_\_\_\_\_\_\_‑**

Note: To best serve our members, we have limited our membership to property owners with addresses extending from the northern edge of Sturgeon Bay to the southern border of the Village of Egg Harbor, within a mile east of the Green Bay shore. Make your check out to BSPOA and send your **$20** dues to :

 BSPOA Membership

P.O. Box 556

Sturgeon Bay, WI 54235

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B.S.P.O.A. MEMBERSHIP INFORMATION

***(Please include this information form with your dues.)***

**Yes**, I/we want to help protect the residential character of Bay Shore Drive by supporting **BSPOA**!

Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Local Address: (Bay Shore Area)**

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Township \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Do you vote here? Yes\_\_\_\_\_\_ No \_\_\_\_\_\_

**E-mail:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **(Please update)** important /time sensitive local issues and meeting information will be e-mailed to you.

**Mailing Address**:

## Same as above - \_\_\_\_\_ Other \_\_\_\_\_ from \_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_ OR All year\_\_\_\_\_\_

 **(month, day) (month, day)**

Other Mailing Address

Street Address**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**THANK YOU**

Forms: WebsiteMembershipForm2020.DOCX **Nancy Buhl – Membership Chair**