

Dues Payment Form

To renew your annual membership please bring this form to the Annual Meeting with your check for \$20 OR mail this form with your check to:

DBPOA
c/o S. Zimmerman
2064 DuBay Drive
Mosinee, WI 54455

County of Lake Property: _____ Township: _____

Home Phone #: _____ Lake Phone#(if different): _____

Full Time Lake Resident? _____ Yes _____ No

Total # of People in Household: _____ Total Number 18 years or Older: _____

Name: _____

Address: _____

Yes, I would like to be involved helping with various activities: _____

E-mail: _____

Remember to sign up for email alerts at <http://www.dubaypoa.com>