

TEN MILE LAKE ASSOCIATION, INC.

**MEMBERSHIP APPLICATION FORM
AND
DIRECTORY INFORMATION RECORD**

DATE: ____/____/____

Name:

Last

First

M.I.

Occupation

Spouse or Significant Other:

Last

First

M.I.

Occupation

Dependent Children's Names: _____

Lake Address: _____ Lake Phone: (____) _____
Hackensack, MN 56452

Other Residence: _____ Phone: (_____) _____
 Home Mobile _____
_____ Phone: (_____) _____
 Home Mobile _____

Please indicate the address to be used for TMLA mailings: ___ Lake ___ Other

Email Address: _____

Annual Dues Payable to the Ten Mile Lake Association: \$40.00.

Please send Form and Dues to: Ten Mile Lake Association
P.O. Box 412
Hackensack, MN 56452