

POQUITO BAYOU COMMUNITY ASSOCIATION, INC. MEMBERSHIP REGISTRATION YEAR

Please complete this form and submit along with your \$20 dues to your Street Director or drop it off at the PBCA mailbox located at 17 Magnolia Ave (Pam Martin's house). Checks will be accepted, made payable to PBCA. Or mail to P.O. Box 1124, Shalimar, FL 32579

(PLEASE PRINT CLEARLY) FOR YEAR 2023 _____ OR 2024 _____

Date Paid: _____ Dues: _____ Donation (specify area): _____ Check #: _____ Cash \$ _____

Name: _____, _____ Spouse's Name: _____
(Last) (First)

Address: _____ Telephone No.: _____ E-Mail Address: _____

Please enter current E-Mail Address

Minor Children: Boys () Ages: _____ Girls () Ages: _____ (If it changes, notify pcmartin1@outlook.com)

Concerns: 1. _____ 2. _____ 3. _____ 4. _____

Would you be willing to help with: Events for Kids _____, Baking _____, Adult Social Events _____, Leo Norred Park & Clean-Up Days _____, Garage Sales Event _____, Interest in Action Committees? Street Maintenance & Traffic Safety _____, Environmental Matters _____, Emergency Action & Neighborhood Watch _____, Eglin Interface _____. Are you interested in serving on PBCA Board of Directors? _____ Community Emergency Response Team (CERT) Training _____. Street Director _____

Other interests, ideas; things you'd like addressed? What are they? _____

(USE BACK OF FORM IF NECESSARY)

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