

POQUITO BAYOU COMMUNITY ASSOCIATION, INC. MEMBERSHIP REGISTRATION YEAR

Please complete this form and submit it along with your \$20 dues. Drop 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 68 Poquito Road, Shalimar, FL 32579 or pay via Venmo/PayPal at www.poquitobayou.com. THANK YOU!!

(PLEASE PRINT CLEARLY) FOR YEAR 2024 _____ 2025 _____

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 the 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)

mbrform Rev. 01/2024

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