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 vis Venmo/PayPal at www.poquitobayou.com. THANK YOU!!

Date Paid:	Dues:	Donation (specify	area):	Check #:	Cash \$
Name:		, ,		Spouse's Name:	
(Last)	(First)				
Address:		Telephone No.:		E-Mail Address:	ent E-Mail Address
Minor Children: Boys ()	Ages:	Girls () Ages:		(If it changes, noti	fy pcmartin1@outlook.com}
Concerns: 1		2	3	4	
Interest in Action Commit	tees? Street Mainten	ance & Traffic Safety , Enviro	onmental Matters	, Emergency Action & Nei	Days, Garage Sales Event ghborhood Watch am (CERT) Training Stre
Other interests, ideas; thing (USE BACK OF FORM		ed? What are they?		mbrform Rev. 01/	
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