

**Lake Beulah Protective & Improvement Association
Membership & Contribution Request**

Member Name(s):

Preferred Mailing Address

Address:

City: State: Zip:

Telephone: *(Optional – if new member
please include so we can contact you regarding your new membership items.)*

Email:

Please include your email in order to receive timely updates.

Lake Address *(you do not have to be a riparian owner to be a member)*

Address:

City: State: Zip:

Comments:

Membership Dues: \$40

Additional Contribution: \$

TOTAL Enclosed \$

Please mail this form and your check to:

LBPIA

PO Box 153

East Troy, WI 53120

*Thank you for joining the generous group of members who are in support of
protecting and improving Lake Beulah.*