

REQUEST FOR MEMBERSHIP
IN LAKE SAMOSET PROPERTY OWNERS ASSOCIATION

NAME:

ADDRESS:

PHONE:

PHONE 2:

EMAIL:

Please check the appropriate items below:

- ☐ I am requesting to become a member of the Lake Samoset Property Owners Association (LSPOA) and am paying the \$225 required for membership. I understand that if my membership is not accepted, this will be returned to me, promptly.

- ☐ I am paying via ☐ Check ☐ Cash ☐ Other (please specify)

- ☐ I would also like to request the LSPOA approval of a beach, should one be available. I understand that this will require an additional \$125, upon approval.

By signing this, I acknowledge that I have read and understand the Rules and Regulations of LSPOA, as presented in writing or from the Website, and that I will abide by these rules.

Signature _____

Date _____

-----For BOARD use only-----

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Membership approved / not approved

Beach Y/N #___ Date