



LAKE JACKSONVILLE ASSOCIATION, INC.

NEW MEMBER APPLICATION OR RENEWAL

Your Check # _____

Name _____ Phone _____

Email _____

2nd Email _____

Mailing Addr. _____

City, State, Zip _____

Lake Address (911 Address) _____

Annual Membership Fee: \$ 20.00 _____ I am available/willing to serve my LJA.

Voluntary Contributions:

Fourth of July Fireworks: \$ _____ (Lake fireworks show by LJA)

Earles Chapel Vol Fire Dept: \$ _____ (Our 1st responder)

Total Enclosed: \$ _____

Mail application and check to:

Lake Jacksonville Assn., Inc.
PO Box 33
Jacksonville, TX 75766

Help us with your Comments/Suggestions:

THANK YOU FOR SUPPORTING YOUR LAKE ASSOCIATION

Rev: 11/25/11