



MEMBERSHIP FORM

(All memberships expire on December 31 each year)

Name (Please print)

Street Address

City/State/Zip

E-mail address (if available)

Phone

Send payment and membership form to:

Friends of the Gile Flowage
P.O. Box 227, Montreal, WI 54550

Please check membership type desired:

Individual \$20.00 _____

Family - \$30.00 _____

All memberships are voting memberships

Questions ?

Call: 715.561.2185

Email: Cathy@friendsofthegile.org