

SLSA
SKELETON LAKE STEWARDSHIP ASSOCIATION

MEMBERSHIP REGISTRATION & INFORMATION UPDATE FORM

My name: _____

My spouse's name: _____

Names of other family members over 18 years of age:

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

Our location at the lake: _____
(eg. Bondiss, Mewatha, Shoreline, County, N/A etc.)

Our address at the lake: _____
(eg. #178 Lakeview Drive)

Phone Number: _____

Other Phone Numbers: _____
(Please specify: eg. cottage, work, cell)

Mailing Address: _____
Street

City/Town Postal Code

*E-mail Address: _____
(*This is very important as our primary method of communication with our members is by e-mail.)

HELP BY VOLUNTEERING

If you or a family member want to help out, please volunteer. Tell us which area you can offer your talents in. We need help in a large variety of areas including environmental, engineering, fundraising, pipelines, electrical, construction, typing, administrative, managing our mail-outs, heavy duty equipment, government relations, door-knocking. The list is endless. Tell us where you would like to help out:

Name of volunteering family member: _____

Tell us how you can help out: _____

*Completed forms can be mailed to: Skeleton Lake Stewardship Association,
Box 156, 9768 – 170 Street, Edmonton, AB T5T 5L4*