

RESIDENTS' VOLUNTEER FORM

Date Received: _____

Note: to be kept on file for one year

LAKES OF MOUNT DORA
PROPERTY OWNERS ASSOCIATION
(LMPOA)

PLEASE PRINT:

Name: _____

Street Address: _____

Phone #: _____ Lot #: _____

E-mail Address: _____

Committee/Position of Interest: _____

Required Field:

Please explain your choice of service and how you can contribute to it (interest, knowledge of, experience in, etc.)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.