

Johnson Lake POA Guardian Program
Please complete this form and mail it with your check payable to
Guardian Program
c/o JLPOA
P.O. Box 461
Webster, WI 54893

Voluntary Contribution Suggestion: \$75 per Property Owner
(Please make checks payable to Guardian Program.)

Date _____

Name _____

Mailing Address _____

Johnson Lake Address _____

Email Address _____

Home Phone _____ Lake Phone _____

Amount Enclosed: \$ _____