

WOAHINK LAKE ASSOCIATION

Membership and Renewal Application

Our goal: [To promote the understanding, protection and thoughtful management of Woahink Lake, its watershed and ecosystem.](#)

Please provide us with the following information:

Name _____

Street Address _____

Mailing Address _____

Email Address _____ Phone _____

The yearly dues are \$20.00 annually per family and runs from July 1st to June 30th each year. If you wish to become a member please return this form and a check payable to:

[Woahink Lake Association](#)
[P.O. Box 431](#)
[Florence, Or 97439](#)

Thank you!



I am interested in:

- Water Testing Boating Safety Weed Removal
 Riparian Restoration Attending BBQ Communications
 Helping with the BBQ Meeting Neighbors Programs