



CAMELOT LAKES VILLAGE HOMEOWNERS ASSOCIATION, INC MEMBERSHIP APPLICATION

NAME (please print) _____

LOT # _____ e-MAIL _____

TELEPHONE # (best for contact) _____

I AM A HOMEOWNER AT CAMELOT LAKES VILLAGE AND _____ I AM A FULL-TIME RESIDENT

_____ I AM A SEASONAL RESIDENT

SEASONAL ALTERNATE ADDRESS: _____

ARE ANY OF THE HOMEOWNER'S MILITARY VETERANS _____ YES or _____ NO
IF YES, PLEASE PROVIDE NAME, SERVICE, AND DATES (years served) THIS WILL BE USED FOR
RECOGNITION. _____

MEMBERSHIP DUES ARE \$20 PER YEAR PAYABLE IN JANUARY

CHECK ONE OR MORE: _____ 2022 DUES _____ 2023 DUES _____ 2024 DUES

APPLICATIONS MAY BE MAILED TO:
CAMELOT LAKES VILLAGE HOMEOWNERS ASSOCIATION, INC, P.O. BOX 22286 SARASOTA, FL 34276-5286

MEMBERSHIP IN CAMELOT LAKES VILLAGE HOMEOWNERS ASSOCIATION, INC, INCLUDES YOUR
AUTHORIZATION FOR CAMELOT LAKES VILLAGE HOMEOWNERS ASSOCIATION, INC, TO REPRESENT YOU, AS
A HOMEOWNER AT CAMELOT LAKES VILLAGE, AND TO CHALLENGE ON YOUR BEHALF ANY INCREASE IN LOT
RENTAL AMOUNT, REDUCTION IN SERVICES OR UTILITIES, OR CHANGE OF RULES AND REGULATIONS
PROPOSED OR ENACTED BY PARK OWNER MANAGEMENT.

*** Member: Signature here to agree to such representation _____

IF YOU ARE INTERESTED IN VOLUNTEER OPPORTUNITIES IN THE HOMEOWNERS' ASSOCIATION, PLEASE CHECK HERE
AND AN HOA REPRESENTATIVE WILL CONTACT YOU. _____

Rec'd \$ _____ on (date) _____ rec'd by (initials) _____