

Three Lake Improvement District 2024

Board Member Application

Name: _____ Phone #: _____

Lake on which property is owned: _____ Number of years: _____

Full Time resident: Yes / No

What Lake issues are important to you:

What qualifications do you have for being a board member:

Why do you want to be a Board Member:

Signed: _____ Date: _____

Mail to:
TLID
4180 105th Ave Unit C
Clear Lake, MN 55319