



GNA Membership Form for Fiscal Year 2024

Complete the following information and return this form to the GNA. You can drop it in the secure GNA mailbox at 9811 Glenlake Dr. The GNA **does not** release any personal information about residents to any outside parties.

Enclosed is my annual GNA dues payment of \$_____ (\$100 per household).

Date: _____

Owner #1: _____

Owner #2: _____

Address: _____

Phone #1: _____ Phone #2: _____

Email #1: _____ Email #2: _____

Comments:

Optional:

I hereby appoint the members of the GNA Board to act as my proxy at any general membership meeting in the 2024 fiscal year that I am unable to attend.

Signed: _____

Date: _____