



*Indian Shores Property Owners  
Association  
Post Office Box 434  
Indian Rocks Beach, FL 33785*

*Membership Application  
\$20.00/per household*

*Name:* \_\_\_\_\_

*Address:* \_\_\_\_\_

*Phone:* \_\_\_\_\_

*E-mail:* \_\_\_\_\_

*Date* \_\_\_\_\_

*Yes, I would like to receive the Mayor's news email.*