

Victor Landowners Association Registration Form

We are not asking for dues or financial contributions.

Name: _____

Address: _____

Phone: _____

E-Mail: _____

Please indicate your preference for participation in the Victor Landowners Association by checking the appropriate boxes.

Member	<input type="checkbox"/>
Committee Member	<input type="checkbox"/>
Advisor or Consultant	<input type="checkbox"/>

Mail form to:
Victor Landowners Association
C/O Jack Dianetti
1450 Brace Road
Victor, NY 14564