



TAXPAYERS' ASSOCIATION OF SEASIDE PARK MEMBERSHIP FORM 2025

Please print all information.

Check: New Member____ Renewal____

PROPERTY INFORMATION

Owner(s): _____

Seaside Park Property

Address: _____

Seaside Park Phone Number: (____) ____ - _____

Phone other number: (____) ____ - _____

Home Address: _____

DELIVERY IS BY EMAIL ONLY PLEASE PRINT CLEARLY

E-Mail Address: _____

Are you interested in becoming an officer or committee member?

Check Yes____ No____

**We are not equipped to handle electronic payments! Reply by
March 15, 2025**

**Membership is \$15 per household annually. Enclose this form and include check made out to
Taxpayers' Association of Seaside Park, Inc. and send to:**

Taxpayers' Association of Seaside Park

PO Box 279

Seaside Park NJ 08752

www.Tasspk.org

