

TAYLOR'S POINT ASSOCIATION (TPA)
2025 Membership Form

Please fill in the following information
Make checks payable to TPA
MAIL TO: TPA c/o Neil Langille
14 Wright Lane, Buzzards Bay, Ma 02532

NAME: _____

\$50 _____ Family Membership Dues \$ _____ Donation

Mailing Address: _____

Cell/Home phone: _____

Email: _____

Interested in volunteering: Yes ☐ No ☐

Feedback: _____

*Membership is required to vote at the Annual Meeting.

Online Payment now available.



Scan to Pay