

MEMBERSHIP APPLICATION

Name(s) _____

Email(s) _____

Address _____

City/State/Zip _____

Phone _____

Email addresses help us reduce postal costs and contact members about timely issues. We guard your email address very carefully and do not share our email list with other organizations or businesses.

- Enclosed are my \$25 annual dues for the current year.
- Enclosed is an additional contribution to the Friends of Loon Lake Association.
- I am interested in learning more about volunteer opportunities with the Association.

Memberships expire on December 31 of each year.

Please return this completed form with payment to:

Friends of Loon Lake Association

PO Box 632

Linden, MI 48451