



# CANADIAN LAKES ASSOCIATION

## MEMBERSHIP FORM for 2025

<b>Section I: Applicant Information</b>	Renewal <input type="checkbox"/>	New Member <input type="checkbox"/>
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**Name:** \_\_\_\_\_ **Lot #** \_\_\_\_\_

If this is a **Renewal** AND all information in **Sections I, II, AND III below** are the same as last year, check here:  and skip to Section IV.

**Address #1**

	Street	City/State	Zip
Phone #1 (    )	eMail #1		

**Address #2**

	Street	City/State	Zip
Phone #2 (    )	eMail #2		

<b>Section II: Directory Information</b>
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**IMPORTANT:** Please mark (  ) the information below that you want included in the next CLA Membership Directory. *Only the marked information will be printed in the directory.*

Same as Last Year      
 Same Except New Phone #      
 Same Except New Email

Name   
 Address #1   
 Address #2   
 Phone #1   
 Phone #2   
 Email #1   
 Email #2

<b>Section III: Lite Lines Mailing</b>
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**IMPORTANT NOTE:**  
 The Lite Lines are not forwarded. To ensure delivery please mark mailing addresses below accordingly.  
 The Lite Lines are mailed approximately the last week of every month.

All Lite Lines Mailed to Address #1 <input type="checkbox"/>	All Lite Lines Mailed to Address #2 <input type="checkbox"/>
At Address #1 from _____ to _____	Leaving on or about date _____
At Address #2 from _____ to _____	Leaving on or about date _____

<b>Section IV: Payment</b>
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<b>2025 CLA Membership Dues:</b>	<b>\$30.00</b>
Number of <b>ADDITIONAL</b> Directories at \$10.00 each (    )	\$
<b>Total enclosed</b>	\$

Any questions or concerns, contact Eric Richards at 231-359-1322, or richardsea77@gmail.com. Please complete and return this form with your check made payable to “**Canadian Lakes Association**” (CLA), for \$30 (plus \$10 for each additional directory). Mail to: Membership Director, 10700 Pierce Rd., Canadian Lakes, MI 49346, or drop off in the Membership mail box at the CLPOC office on Pierce Rd.