Section I: Applicant Int	formation	Renewal 🗆	New Member □
Name:			Lot#
If this is a Renewal AN check here: \square and skip		in Sections I, II, AND III below an	re the same as last year,
Address #1			
	Street	City/State	Zip
Phone #1 ()		eMail #1	
Address #2			
ľ	Street	City/State	Zip
Phone #2 ()	ne #2 () eMail #2		
Costion II. Discotore Inform			
Section II: Directory Inform		on below that you want included in the	navt CI A Mamhawahin
Directory. <i>Only the marke</i>	• •	•	next CLA Weinbership
	·	_	_
Same as Last Year \square	Same F	Except New Phone # 📙	Same Except New Email
Name Address #1	Address #2	Phone #1 Phone #2	Email #1 Email #2
Castian III. Lita Linas Mail	·n a		
Section III: Lite Lines Mail IMPORTANT NOTE:	ing		
		ivery please mark mailing addresses bett week of every month.	ow accordingly.
All Lite Lines Mailed to Adda	ress #1	All Lite Lines Mailed to	Address #2
At Address #1 from	to	Leaving on or about date	
At Address #2 from			
	to	Leaving on or about dat	e
	to	Leaving on or about dat	e
Section IV: Payment	to	Leaving on or about dat	e
		Leaving on or about dat	\$30.00
Section IV: Payment 2024 CLA Membershi Number of ADDITION	p Dues:		

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.