

Please use this envelope to mail your check or
pay by credit card at www.lakeleelanau.org

Name

(s) _____ ht56 _____

PERMANENT ADDRESS

Street _____

City _____

State ____ Zip _____

Phone (_____) _____

*Email _____

***Please help us to keep you informed of LLLA events by providing your email address.
We will NOT share your email address with third parties.**

LOCAL ADDRESS (if applicable)

Mail No Mail

Street _____

City _____

State ____ Zip _____

Phone (_____) _____

Annual Membership Levels

- \$25 \$50 \$100
 \$250 \$500 \$1000
 Custom Business (\$100 to \$1000)

I wish to make an additional
donation of \$ _____
Total \$ _____

Would you like to volunteer? If so, please note area of interest _____

An Association Volunteer will contact you by email or phone.

Comments, questions, suggestion: _____

Lake Leelanau Lake Association is a non-profit 501c3 organization.