



**Lake Iroquois  
Association**

*Please make checks payable to: Lake Iroquois Association, Inc.*

**Mail to: Lake Iroquois Association, PO Box 569, Hinesburg, VT 05461**

## **Membership Form**

**Type of membership:**

Individual (\$25) \_\_\_\_\_ Family (\$50) \_\_\_\_\_

Amount enclosed for membership: \$ \_\_\_\_\_

**Additional Donation:**

\$500 \_\_\_\_\_ \$250 \_\_\_\_\_ \$100 \_\_\_\_\_ \$50 \_\_\_\_\_ other \_\_\_\_\_

**Total Enclosed: \$ \_\_\_\_\_**

Name:

\_\_\_\_\_

Street:

\_\_\_\_\_

Town/State/Zip

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

***THANK-YOU!***