

# H.L.C.A. 2009 MEMBERSHIP APPLICATION

Haliburton Lake Cottagers Association  
5041 Haliburton Lake Road, R. R. # 1  
Haliburton, ON. K0M 1S0

## FULL MEMBER:

Name: \_\_\_\_\_  
\_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ Please mail my  
Newsletter package.  
  
\_\_\_\_ I would like to  
pick up my Newsletter  
package on May 16 at  
the A.G.M. at the Hall.

Home Telephone: \_\_\_\_\_ Cottage Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Cottage Road Name and Blue 911 #: \_\_\_\_\_

## ASSOCIATE MEMBERSHIP # 1:

## ASSOCIATE MEMBERSHIP # 2:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_ E-mail: \_\_\_\_\_

Note Full Membership: \_\_\_\_\_ Note Full Membership: \_\_\_\_\_

### MEMBERSHIP

### DONATIONS

\_\_\_\_ Full Membership \$60.00

\_\_\_\_ Fireworks Donation \$ \_\_\_\_\_

\_\_\_\_ Associate Membership \$25.00 (each)

\_\_\_\_ Major Project Donation \$ \_\_\_\_\_

\_\_\_\_ Renewal \_\_\_\_ New

\_\_\_\_ Donation to Hospital \$ \_\_\_\_\_

\_\_\_\_ Change of Address

\_\_\_\_ **I would like to volunteer !** \_\_\_\_ Regatta \_\_\_\_ Bingo \_\_\_\_ Corn Roast \_\_\_\_ Other

**\*\* Please add any information, remarks or suggestions on the back of this form.**