

**Lake Iroquois Association, Inc.  
Membership**

**Type of membership:**

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

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

**Additional Donation:**

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

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

Name:

\_\_\_\_\_

Street:

\_\_\_\_\_

Town/State/Zip

\_\_\_\_\_

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

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

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

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

***THANK-YOU!***