



# Les Cheneaux Islands Association Annual Statement of Membership Dues

Due Date: July 31, 2018

Mail To: LCIA - 1158 S. Park Ave., Cedarville, MI 49719

(questions call 906-484-2558 or email: [lcia@cedarville.net](mailto:lcia@cedarville.net))

## Membership Dues July 1, 2018 - June 30, 2019

### Inspection Membership

Location/Address	Dues
Island Residence _____	\$110.00 _____
Island Boathouse _____	\$30.00 _____
Island Guest Cottage(s) _____	\$30.00 ea. _____
Mainland Residence _____	\$110.00 _____
Mainland Boathouse _____	\$30.00 _____
Mainland Guest Cottage(s) _____	\$30.00 ea. _____
Mainland Garage _____	\$30.00 _____

### Non-Inspection Memberships

<input type="checkbox"/> Commercial Membership	\$55.00 _____
<input type="checkbox"/> Supporting Membership	\$55.00 _____
<input type="checkbox"/> Associate Membership	\$10.00 _____

*The above memberships include all LCIA mailings and newsletters.*

*Supporting and Commercial Memberships are for those who do not require property inspections but want to support the LCIA and its projects.*

*An Associate Membership is for additional family members or co-owners who would like to receive LCIA information, mailings, newsletters, etc.*

### Additional Donation

\$ \_\_\_\_\_

Donations are appreciated and used for various projects such as:

- Navigational Buoys
- Youth Boating Safety Classes
- Water Quality Issues

### Total Dues & Donation

\$

**\*Please fill out name & address information on reverse side.**

*Thank you for being a member of the Les Cheneaux Islands Association!!*

**Inspection Membership - Owner (Primary Contact):**

\_\_\_\_\_  
Last Name                      First Name                      Spouse

\_\_\_\_\_  
Winter Mailing:                      Street Address

\_\_\_\_\_  
City / State / Zip code                      Phone

\_\_\_\_\_  
Summer Mailing:                      Street Address

\_\_\_\_\_  
City / State / Zip code                      Phone

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

\_\_\_\_\_  
Local Caretaker and/or Alternate Contact

**Co-Owner / Associate Membership:**

(Include \$10.00 additional dues for each Associate Membership)

\_\_\_\_\_  
Last Name                      First Name                      Spouse

\_\_\_\_\_  
Winter Mailing:                      Street Address

\_\_\_\_\_  
City / State / Zip code                      Phone

\_\_\_\_\_  
Summer Mailing:                      Street Address

\_\_\_\_\_  
City / State / Zip code                      Phone

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

**Commercial Membership:**

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Owner / Primary Contact                      Spouse

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

\_\_\_\_\_  
City / State / Zip code

\_\_\_\_\_  
Phone

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

**Supporting Membership:**

\_\_\_\_\_  
Last Name                      First Name                      Spouse

\_\_\_\_\_  
Winter Mailing:                      Street Address

\_\_\_\_\_  
City / State / Zip code                      Phone

\_\_\_\_\_  
Summer Mailing:                      Street Address

\_\_\_\_\_  
City / State / Zip code                      Phone

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

Interested In Volunteering?    Yes \_\_\_\_\_    No \_\_\_\_\_

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_