



Les Cheneaux Islands Association Annual Statement of Membership Dues

Due Date: August 1, 2021

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

Questions: Call 906-484-2558 or email lescheneauxislandsassociation@gmail.com

Membership Dues July 1, 2021 - June 30, 2022

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 & 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 LCIA's programs & projects:

- * Navigational Buoys
- * Water Quality
- * Local Government Interaction
- * Property Inspections
- * Youth Boating Certification Classes
- * Member Communications

TOTAL DUES & DONATION \$

Please provide name, address & email 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:

