

**KAWAGAMA LAKE COTTAGERS' ASSOCIATION**  
**MEMBERSHIP APPLICATION FORM**  
P.O. Box 98 Dorset, Ont. POA 1E0  
[www.klca.org](http://www.klca.org)

Thank you for becoming a member of Kawagama Lake Cottagers' Association.  
The membership fee is \$35.00 OR \$45.00 if you want to receive *Reflections* by mail.  
Reflections will be mailed at the end of August. (\$10 extra covers postage)

The membership period is January to December. Members can pick up *Reflections* at Mountain Trout House Marina or Old Mill Marina **after** the July long weekend.

Where multiple generations of a family enjoy your cottage, we would encourage each generation to join independently. Additional membership applications are available on our website.

Please note: Freedom of Information Legislation requires your permission to publish personal information. WE MUST HAVE YOUR SIGNATURE on file TO PUBLISH YOUR NAME, ADDRESS AND PHONE #'S IN *REFLECTIONS*

YES \_\_\_ I CONSENT TO MY NAME, ADDRESS AND PHONE NUMBERS BEING PUBLISHED IN *REFLECTIONS*. (I understand this information is used only for KLCA communication and is not shared or sold for any other purpose)

**Consent Signature:** \_\_\_\_\_

NO \_\_\_ DO NOT PUBLISH MY PERSONAL INFORMATION IN *REFLECTIONS*.

**Our publication deadline is April 15-after which we can't guarantee your inclusion in Reflections**

New Membership \_\_\_\_\_ Membership Renewal, with changes required \_\_\_\_\_

NAME: \_\_\_\_\_

LAST

First

SPOUSE: \_\_\_\_\_

LAST

FIRST

ADDRESS: \_\_\_\_\_

CITY/TOWN

PROV/STATE \_\_\_\_\_ Postal Code/Zip Code \_\_\_\_\_

COTTAGE PHONE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

**KAWAGAMA / BEAR LAKE ADDRESS & TOWNSHIP (Dysart or Algonquin Highlands)**

\_\_\_\_\_

This is your 9-1-1 address

EMAIL ADDRESS: \_\_\_\_\_

Would you like to receive the 2012 newsletter and membership renewal via email? \_\_\_\_\_

We do not publish or share email addresses

As you can no doubt appreciate, any organization's success depends on its volunteers. Please sign below if you wish to share your talents and time with KLCA:

Name: \_\_\_\_\_ Area of interest \_\_\_\_\_

I wish to volunteer with KLCA. Please have someone call me to discuss my preferences and time availability.

I would like to make a donation to support KLCA programs. Please make cheques payable to KLCA.

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