



Membership Form (*Memberships are due July 1st each year.*) **Date:** _____

I would like to support the conservation efforts of the Lake Clear Conservancy.

Note that the LCC can now accept payment by Visa or MasterCard, or by e-transfer to our treasurer at

treasurer.lakeclearconservancy@gmail.com Please check all that apply:

- \$40 for a family membership \$25 for an individual membership
 I wish to make an additional donation of: \$ _____.
 I would like a charitable receipt.
 Cheque is enclosed. I will send an e-transfer.

Please bill my credit card. Circle one: Visa MasterCard

Number _____

Expiry date _____

Name as it appears on card: _____

I would like to take advantage of the LCC's automatic renewal service. I will be advised each year before my membership is renewed by credit card and I may cancel the automatic renewals at any time.

I can help. Please give me a call to discuss how I can be a Lake Clear Conservancy volunteer.

Please fill in the information below so that we can keep you informed.

Name:

Mailing Address:

Local Civic Address:

Phone:

Email:

Please return this form to Box 141 Eganville, On, K0J 1T0

For more information visit our website at www.lakeclearconservancy.org or contact us at lakeclearconservancyboard@gmail.com