

LCIA
Lake Crookneck Improvement Association Membership
2018

Please make corrections as necessary

Names: _____

First Names

Last Name

Home Address: _____

Address

City

State

Zip Code

Home Phone Number: _____

Lake Address: _____

Lake Phone: _____

Cell Phone: _____

E-Mail Address: _____

E-Mail Address #2: _____

I would like to be included in a membership directory: Yes No

Signature: _____

Membership Dues - \$10.00

Make Checks payable to: LCIA

Return to:

Amber Parker
2384 65th St.
Lino Lakes, MN 55038