



APPLICATION FOR MEMBERSHIP

LAKESIDE CLUB OF MANISTEE

It is my desire to become an active member of the Lakeside Club of Manistee County. While a member, I pledge to abide by and obey the Club's Bylaws.

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

In accordance with Article II Section II of our Policies and Procedures, I hereby endorse the application of \_\_\_\_\_ to become a member of the Lakeside Club of Manistee County.

Referred by \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Beth Stehr, Director of Membership

Notes:

Date Confirmed by Board of Directors: \_\_\_\_\_

Peggy Raddatz, Secretary

X Orientation X Memorial Form Completed X Hostess Committee X Dues paid

X Membership Book X TOH Committee X FOT Committee

