



HLPOA™ Dues, payable by January 31, 20__ : \$ 115.00

Donation to:	General Fund:	\$ _____
(Thank you!)	Environmental Fund:	\$ _____
	Legal Fund:	\$ _____
	TOTAL Enclosed:	\$ _____

Please complete form in its entirety to help us expedite processing your membership. Your parcel ID# can be found on your winter tax form.

Member Name(s): _____

Membership (Check only one)

Voting
 Non-Voting

(Check only one) Lakefront Property

Shared Lakefront Property
 (Please include your local association's name.) _____

Name property assessed to or person named on tax assessment roll: _____

Tax/Parcel I.D. Number: _____

Membership is open to any person or entity that has an ownership interest in a lakefront parcel. (Voting is generally one vote per lakefront parcel. See HLPOA™ Bylaws, Article 3 at www.hlpoa.org for spe

Email address #1: _____

Email address #2: _____

Please include your email address for effective communication and updates. Email address will be kept strictly private.

Feel free to adhere an address label for your permanent address.

Permanent Address: (For all correspondence) _____

P.O. Box: _____

City: _____ State: _____ Zip Code: _____

Phone #1: _____ Phone #2: _____

Lake Address: (For eligibility) _____

City: _____ State: _____ Zip Code: _____

Phone #1: _____ Phone #2: _____

website: www.hlpoa.org

ph: 989-275-9181

email: hlpoa0@gmail.com

Higgins Lake Property Owners Association™ P.O. Box 55 Roscommon, MI 48653