

**Christie Lake Association Inc. (CLA)**  
**2018 MEMBERSHIP FORM & DIRECTORY UPDATE**  
Annual Membership Fee: \$30 per Family



1. **Family Name:** \_\_\_\_\_
2. **Name of family members aged 18 years or older to be enrolled as CLA members for the year indicated above:**  
*(use reverse side of form if you run out of space)*  
\_\_\_\_\_  
\_\_\_\_\_
3. **Lake Address:** Blue/White PIN # \_\_\_\_\_ Lane/Road \_\_\_\_\_  
**Lake Phone #:** (     ) \_\_\_\_\_
4. **Home Address:** \_\_\_\_\_ Apt. # \_\_\_\_\_  
City: \_\_\_\_\_ Province/State \_\_\_\_\_  
Postal/Zip Code: \_\_\_\_\_ **Home Phone #:** (     ) \_\_\_\_\_
5. **Email Address(es):** \_\_\_\_\_ *(use reverse side of form if you run out of space)*  
\_\_\_\_\_  
\_\_\_\_\_

6. **Christie Lake Directory:**
- I consent to the publication of the information contained in items 1 to 3 above in the Christie Lake Directory.
- I consent to the publication of partial information contained in items 1 to 3 above in the Christie Lake Directory.  
*Do not publish:* \_\_\_\_\_
- I do not consent to the publication of any information contained in items 1 to 3 above in the Christie Lake Directory.

7. **CLA Communications:** *(Spotlight Newsletters and Notices)*
- Yes, email CLA communications to me in the 'bcc' format. *(Note: new email addresses will receive a one-time request by email to 'opt-in' to receive CLA email communications as required by the new Canadian Anti-spam Legislation).*
- No, do not email CLA Communications to me. Mail printed copies of Newsletters and important Notices to me at my home address.

8. **Emergency Contact:** *(in the event you are unavailable to respond to property damage, fire, theft etc.).*
- Name: \_\_\_\_\_ Phone #: (\_\_\_\_\_) \_\_\_\_\_
- Emergency contact information may enable CLA to notify members about matters requiring prompt attention. CLA accepts no obligation or legal responsibility to monitor members' properties, nor to notify them or their emergency contacts about such matters, but may choose to do so as a matter of courtesy.*

9. **Amount Enclosed:** \$ \_\_\_\_\_ *(cheque made payable to 'Christie Lake Association Inc.')*

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

**Send completed form and cheque to:**  
*(or hand in payment at any CLA Event)*

Christie Lake Association Inc.  
P.O. Box 20058  
Perth, Ontario K7H 3M6

**Thank you for your support!**

For information on what Membership includes, please visit the Membership page under 'About CLA' on our Website. If you have any questions or concerns, or require more information, please 'Contact Us' on our Website at <http://christielakeassociation.com>.