



# Women's Club Membership/Renewal Application

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

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

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

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

Section: \_\_\_\_\_ Lot: \_\_\_\_\_ Birthday: Month \_\_\_\_\_ Day \_\_\_\_\_

- Annual dues cover September through June.
- Login to **[www.golakecarroll.com](http://www.golakecarroll.com)**, click **Activities and Clubs** and then click **Social Clubs** for more information and to find contact information for a current Women's Club officer.
- Please make \$20.00 membership check payable to: LC Women's Club and
- Mail to: Rosanne Stangl, 23-201 Brittany Ct, Lake Carroll, IL 61046