## **Lake Pines Club, Inc.**Application for Membership

| <b>Date:</b>   |                         |                         |                      |
|--|-------------------------|-------------------------|----------------------|
| Applicant Name:  |                         |                         | Age:                 |
| Address:   |                         |                         |                      |
| <b>Phone#</b> : (H)  |                         |                         |                      |
| Email address:   |                         |                         |                      |
| All Family Members livi  | ng in same household (i | include ages and relati | onship):             |
|  |                         |                         |                      |
|  |                         |                         |                      |
| Emergency Contact: Name and Relation:  |                         |                         |                      |
| Phone #:   |                         |                         |                      |
| Two (2) sponsors are requ  | ired and sponsors must  | be current members an   | nd in good standing. |
| Sponsor's Name and Tel   | ephone:                 |                         |                      |
| Sponsor's Name and Te  | ephone:                 |                         |                      |
| Signature of Applicant:  |                         |                         |                      |
| I understand that filling ou<br>Inc. Applicants are voted<br>phone or email. |                         | -                       |                      |
| For Office Use Only:   |                         |                         |                      |
| Date Received:   |                         | Sponsors Verified: _    |                      |
| Officer Signature:   |                         |                         |                      |