



Membership Form

West Lake Community Association (WLCA)

The membership year is from
June 1/20_____ to May 31/20_____

Annual Membership Fees:

\$25 Family/Business/Agriculture Membership ☐

OR

\$15 Single Membership ☐

Total Payable: (see below) _____

Name(s): _____

Address: _____

Postal Code: _____

Email: _____

Phone: _____

Payable by cheque to:
West Lake Community Association (WLCA)
c/o 1370 County Rd. 12
Picton, Ontario K0K 2T0
or e-transfer: westlakeca.pec@gmail.com

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Are you interested in serving on the WLCA Board?

☐ Yes ☐ No

Are you interested in serving on a Sub-Committee?

☐ Yes ☐ No

What are your areas of interest? _____

Is there a specific issue of concern in the West Lake Community that you would like brought to the attention of the WLCA Executive Committee?

If so, please provide details:

If you would like to join the WLCA Private Facebook Group, **West Lake Neighbours PEC**, please send your request to: coultisj@gmail.com

Thank you.

