



Crystal Lakes Community Fund Association (CLCFA)

Application for Membership

I (We) would like to become members of the CLCFA to help identify and fund programs that improve, enhance the beauty of, and preserve the common good of Crystal Lakes.

Date: _____

Member Name: _____

Second Member Name (if applicable): _____

Member Address: _____

Amount of Membership: _____

Crystal Lakes Friend	\$10-\$24.99
Crystal Lakes Supporter	\$25-\$49.99
Crystal Lakes Patron	\$50 and up

Telephone Number: _____

Crystal Lakes Filing/Lot Number: _____

Please mail the completed application, along with your check made payable to the CLCFA to the following address:

Crystal Lakes Community Fund Association
Attention: Ray Williams
300 Tami Road
Red Feather Lakes, CO 80545

Thank you for your generous donation! Please contact any CLCFA Board member if you have questions or ideas for projects or visit us on the web (crystal-lakes.org/community-fund).