

**Please Note: Your  
email address will  
be kept  
confidential and  
WILL NOT be sold**



Please circle  
Cash      Cheque  
1 yr    3 yr    5 yr  
Date: \_\_\_\_\_

## MEMBERSHIP APPLICATION/RENEWAL

(for renewals, enter your LP address and any changes to your information)  
(please print)

### LONG POINT ADDRESS

Primary Name \_\_\_\_\_

Spouse/Co-owner \_\_\_\_\_

Address \_\_\_\_\_ Port Rowan, ON, N0E 1M0

Email(s) \_\_\_\_\_ Phone \_\_\_\_\_

Other LP Property that you own (if applicable)

### MAILING (PRIMARY) ADDRESS Same as above (please circle if applicable) or

Address \_\_\_\_\_ City \_\_\_\_\_

Province/State \_\_\_\_\_ Postal/Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact Number (if we cannot contact you)

Do you consent to receive emails from the LPRA?(eg. Newsletters, updates, etc.)

YES      NO    (please circle)

Would you be willing and able to serve as an LPRA Director if requested?

YES      NO    (please circle)

Do you have security surveillance cameras and would you be willing to share the video if requested by the OPP in the course of an investigation?

YES      NO    (please circle)

**PLEASE COMPLETE THE ABOVE AND SEND IT WITH PAYMENT TO THE  
ADDRESS AT THE TOP**

*1 Year Membership is \$20    3 Year Membership is \$60    5 Year Membership is \$100*