



Application type :  New  Renewal

## 2023-2024 MEMBERSHIP FORM

To become a member, please fill out online or mail in completed application with your yearly membership dues.

### PERSONAL INFORMATION

**First & Last Name**

**AFFILIATION/  
PROGRAM NAME**

**Address**

**City, State, IL**

**Phone Number**

**E-Mail**

The best way to inform you about our benefits and events is by joining our mailing list.  
Can we add you to our email list?

**Yes, please add me to your email list to stay informed**

### MEMBERSHIP OPTIONS

#### MEMBERSHIP TYPE

#### ANNUAL FEE

Select one:

- Individual \$25.00
- Group Option A  
(Groups with 10 or fewer people) \$40.00
- Group Option B  
(Groups with 11 or more people) \$60.00

**Signature**  **Date**

#### REMIT APPLICATION & PAYMENT TO:

ECCC OF LAKE COUNTY  
P.O. BOX 61  
GURNEE, IL 60031

#### IN-PERSON OR MAIL IN REGISTRATION

AMOUNT RECEIVED/INCLUDED \$ \_\_\_\_\_

CASH  CHECK # \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_



Please use this form to provide the names of people who you would like to be included in your group membership.

FOR GROUP MEMBERSHIPS

AFFILIATION/PROGRAM NAME

First & Last Name

Phone Number

E-Mail

First & Last Name

Phone Number

E-Mail

First & Last Name

Phone Number

E-Mail

First & Last Name

Phone Number

E-Mail

First & Last Name

Phone Number

E-Mail

For more entries please make a copy of this page.