

Little Fish Lake Association (LFLA)

2022-23 Membership Application

(Through June 30, 2023)

Name (Primary Member): _____

Spouse's Name: _____

Lake Address: _____

City: _____ State: MI Zip: _____

Mailing Address: _____ ☐ Same as above

City: _____ State: _____ Zip: _____

Cell Phone: (_____) _____ (_____) _____
Primary Member Spouse

Email: _____
Primary Member

Spouse

FEE: **\$25**

Please mail this form & check to:
Little Fish Lake Association
PO Box 270
Cassopolis, MI 49031

Please make check payable to: Little Fish Lake Association
(do not send cash)
Questions? Email us at:
littlefishlakeassociation@gmail.com

(Or drop at 17125 Stevens Forest Lake St., Colgan)