



Yes, I want to help!

- ☐ I'd like to support the SEOP with my annual gift of \$ _____
- ☐ I'd like to meet Dockside Torch Lake's challenge with my SEOP gift of \$ _____ for each of the three years
- ☐ I can make a one-time gift of \$ _____

(Optional) My gift to SEOP is in honor of _____

Name _____

Summer address _____

Winter address (if different) _____

Phone: _____

E-mail: _____

Please complete this form and mail it to:

Three Lakes Association

PO Box 689

Bellaire, MI 49615

If you are making a one-time gift, please enclose your check. Otherwise, we will bill you.