



THREE LAKES
ASSOCIATION

Yes, I want to help!

- I'd like to support the SEOP with my annual gift of \$ _____
- 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: _____

To donate to SEOP, please complete this form and mail to:

Three Lakes Association
PO Box 689
Bellaire, MI 49165