



Phragmites Treatment Permission Slip

I, the undersigned, give the Lake Charlevoix Association and their assigns, permission to survey and treat invasive phragmites on my property, as allowed by their permit through the MDEQ.

Printed Name	Signature
Legal Lake Charlevoix Property Address	
Mailing Address (if different)	
Phone	email

Please Consider Joining the Lake Charlevoix Association

Yearly Memberships are good through May 2012

- \$25/year – Regular
- \$50/year – Patron or Business
- \$100/year – Sustaining
- \$1000 – Life Membership

Please complete this form and mail it (with a check if you choose to join) to
Lake Charlevoix Association, PO Box 294, Charlevoix, MI 49720, or join online at
<http://lakecharlevoix.org>