



PO BOX 463 Monmouth, IL 61462

## APPLICATION FOR ASSOCIATE MEMBERSHIP

(All Information Required)

Applicants Name(s) \_\_\_\_\_

Legal Name: \_\_\_\_\_ SSN \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Primary Email Address: \_\_\_\_\_ DOB \_\_\_\_\_

Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Previous Member? \_\_\_\_\_ Year \_\_\_\_\_

Spouse Legal Name: \_\_\_\_\_ SSN \_\_\_\_\_

Primary Email Address: \_\_\_\_\_ DOB \_\_\_\_\_

Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Previous Member? \_\_\_\_\_ Year \_\_\_\_\_

Children residing in home under age 21 years (see By Laws Article 11, V.):

_____	Age: _____	_____	Age: _____
_____	Age: _____	_____	Age: _____
_____	Age: _____	_____	Age: _____

**Sponsors:** Signatures by two current members of Lake Warren and are not covered under the same membership. (In case of a lease transfer or sub-lease a sponsor may not be the lessee.)

1) \_\_\_\_\_ Phone Number: \_\_\_\_\_

2) \_\_\_\_\_ Phone Number: \_\_\_\_\_

Please return or mail the membership application with a check for \$200.00 for Membership Dues plus a \$20.00 processing fee *per applicant* to the corporate office 10 days prior to the scheduled monthly meeting (held on the 2<sup>nd</sup> Wednesday evening at 7PM of each month except the November annual meeting). Meetings are held at the Security Savings Bank, 220 East Broadway, Monmouth IL. A representative of the Membership Committee will contact you prior to the meeting to discuss the Hickory Grove By-Laws and considerations for approval. Your presence **will then be required** at the monthly meeting for confirmation. Background checks may be performed.

Unapproved applications will be returned to applicants along with refunded application fees.

I (We) the undersigned have read and do understand the By-Laws of Hickory Grove Lake Company and hereby agree to follow the By-Laws if membership is approved.

Applicant Signatures: \_\_\_\_\_

Application approved this \_\_\_\_\_ day of \_\_\_\_\_,

Corporate Office: 245 Lake Warren Drive Monmouth Il, 61462  
Tuesday 1-4 pm and Thursday 1-4 pm  
Office Phone: 309-734-3894

Revised Feb 2023