SC COLA
Sherburne County Coalition Of Lake Associations

2026-2027 Membership Form

Membership year is from July 1 to June 30

Organization / Individual Name: _____

Estimated number of organization members: _____

2026-2027 Delegates & Alternate: Organizations may appoint up to two Delegates, who are the spokespersons for their organization and are expected to attend SC COLA meetings and participate in SC COLA work groups. An alternate (optional appointment) may be declared to take the voting place of a Delegate in the event of their absence. Alternates are encouraged to attend meetings and keep up-to-date on activities.

Note: If joining SC COLA as an Individual or organization, include your information as "Primary Delegate".

Primary Delegate #1

Name:
Address:
City, State, Zip:
Phone:
Email:

Delegate #2

Name:
Address:
City, State, Zip:
Phone:
Email:

Alternate Delegate

Name:
Address:
City, State, Zip:
Phone:
Email:

Communications Contact (for directory)

Name:
Address:
City, State, Zip:
Phone:
Email:

Select your 2026-2027 Member Status and Dues Amount:

1) Determine your member status, 2) Write the dollar amount on the corresponding line.

_____ **Lake Organization (*Voting Member status*)**
$100 per year for July 1 to June 30

_____ **Individual (*Associate Member status, no voting privileges*)**
$20 per year for July 1 to June 30

_____ **Non-profit (*Organizational Member status, no voting privileges*)**
$100 per year for July 1 to June 30

Checks may be made payable to: Sherburne County COLA

Send completed Form and Payment to: Sherburne County COLA
c/o Sherburne County SWCD
425 Jackson Ave. NW
Elk River, MN 55330