

Local Government Members
Membership Application Form
McHenry County Council of Governments

Local Government: _____

Primary Contact: _____

Title: _____

Phone number: _____

Fax number: _____

E-mail: _____

Address: _____

Preferred mode of communication to receive information regarding MCCG:

___ via e-mail

___ via US Mail

___ via fax

Please complete this form and enclose a check for \$500 made payable to the McHenry County Council of Governments and return to the McHenry County Council of Governments c/o Village of Lake in the Hills 600 Harvest Gate Lake in the Hills, IL 60156. Thank you for your support of the MCCG.