

**LAKE SUMMERSET ASSOCIATION GUEST AUTHORIZATION**

Host LSA Member \_\_\_\_\_  
(Last Name) (Initials)

Lot No. \_\_\_\_\_

Date of Guest's Arrival \_\_\_\_\_

Date of Departure \_\_\_\_\_

***Guest's Name***

1. \_\_\_\_\_

2. \_\_\_\_\_

Member Signature \_\_\_\_\_

Additional Guests may be added below:

Guest's Name

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

Instructions:

A card must be filled out for guests to enter.  
Restricted to a maximum of 4 days if indicated.

Up to 10 names can be added to this card.

**PLEASE PRINT NAMES ALPHABETICALLY.**

This form can be mailed, hand delivered to the  
Guardhouse or faxed to the guardhouse at  
815-248-4236.

or emailed to: [efaxpass15@outlook.com](mailto:efaxpass15@outlook.com)

The mailing address is:

Lake Summerset Association  
1202 Lake Summerset Road  
Davis Illinois 61019

1. Print this page. 2. Fold along the dotted lines