

2020 Membership Application/Renewal

NAME _____ DATE _____

ADDRESS _____

CITY/TOWN _____ PROVINCE _____

POSTAL CODE _____ PHONE (_____) _____

E-MAIL _____

Would you like to receive our newsletter by e-mail? YES ___ NO ___

Would you like to receive a reminder of Meetings by e-mail? YES ___ NO ___

MEMBERSHIP: \$20.00 (*January 1, 2020 to December 31, 2020*)

Please make cheque payable to: M.E. Society of Edmonton (CFS)

Regular Member \$20.00 Cheque Cash Money Order

Compassionate Membership

(Due to financial hardship. You may also renew your Compassionate Membership by calling the office at 780 944-0809 or emailing Michele at michele.schuler@mesocietyedmonton.org)

Form must be submitted annually, for updating information.

DONATIONS: AMOUNT DONATED \$ _____

* Standard receipts will be issued for membership fees, and tax receipts for donations over \$10.00

Please return your membership form to:

ME Society of Edmonton`
11630 Kingsway Ave
Edmonton AB T5G 0X5