

M.E. Society of Edmonton

Membership Application/Renewal

NAME _____ DATE _____

ADDRESS _____

CITY/TOWN _____ PROVINCE _____ POSTAL CODE _____

E-MAIL _____

PHONE: _____

DATE OF BIRTH (mm/dd) (optional) _____ (We will send you a birthday card!)

Please check the box beside any of the following items you would like to receive:

Would you like to receive our newsletter by email?

Would you like to receive ME/CFS news by email?

Would you like to receive a Support Group reminder by email?

Would you like to receive an occasional supportive phone call?

Memberships can be renewed in the following ways:

1. Leave a message including your name and phone number at 780 944-0809.
2. Email a copy of your completed form to general.info@mesocietyedmonton.org
(Click on the SUBMIT button at the top of the form to email it)
3. Mail your completed membership form to:

M.E. Society of Edmonton

#7, 11630 Kingsway Ave

Edmonton AB T5G 0X5

DONATIONS: AMOUNT DONATED \$ _____

Please make cheque payable to: M.E. Society of Edmonton (Chronic Fatigue Syndrome)

Donations can also be sent by e-transfer to: general.info@mesocietyedmonton.org

*Tax receipts are issued for donations over \$10.00.