

Membership Form

Mr./Mrs./Ms.	Last Name	First Name
Address		City Postal Code
Telephone Number		E-Mail Address

Please note the membership fee is \$10.00 per year and is in the name of one person. Membership entitles you to one vote at the Annual General Meeting.

Enclosed Please find:

Membership fee of:

_____ 1 year \$10.00
 _____ 2 year \$20.00
 _____ Additional memberships
 (\$10.00 each per year)

I would like to make a donation of:

\$100 _____
 \$ 50 _____
 \$ 25 _____
 Other _____

Please list the full names of additional members below:

Please make cheques payable to Community Living Durham North and return to:

60 Vanedward Drive, Unit 2
 P.O Box 964
 Port Perry, Ontario
 L9L 1A8

Charitable Registration # 106887813 RR0001

Thank you for your support!

