

## MEMBERSHIP APPLICATION FORM

This form may also be used to give us your new address OR to renew your membership.	<b>Make check payable to :</b> Family Trudel Association Inc. 3941, Émile Deschênes Shawinigan, QC, G9P 5A6
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Family Name : \_\_\_\_\_ Given Name : \_\_\_\_\_

Address : \_\_\_\_\_

City : \_\_\_\_\_ State : \_\_\_\_\_ Country : \_\_\_\_\_

Zip Code : \_\_\_\_\_ Phone : (    ) \_\_\_\_\_

Email : \_\_\_\_\_

Check (X) where applicable      Your membership number : \_\_\_\_\_

New Membership :      
 Renewal :      
 New Address :

### ANNUAL MEMBERSHIP

(1) Person living with a regular member (**same address**) and **who does not receive any written communication from the Association.**

(2) This voluntary contribution is to create a special fund (accounted for separately) dedicated to the preservation of our land and our monument.

Have you been thinking about finding a different way to support your family association? Why not become a Lifetime Member\*?

By filling out the appropriate form and by sending in \$1,000.00, you can become a Lifetime Member\* of the Trudel(l)(le) Family Association.

\* (Please note Lifetime Memberships are valid for a maximum of 25 years.)

Lifetime Member      \_\_\_\_\_ \$

Regular member	30,00 \$	<input type="checkbox"/>
2 years	50,00 \$	<input type="checkbox"/>
Member outside of Canada	35.00 \$	<input type="checkbox"/>
2 years	55.00 \$	<input type="checkbox"/>
Affiliated member (1)	15,00 \$	<input type="checkbox"/>
2 years	30,00 \$	<input type="checkbox"/>
Benefactor member	50,00 \$	<input type="checkbox"/>
Voluntary contribution (2)	10,00 \$	<input type="checkbox"/>
Donation	_____ \$	<input type="checkbox"/>
Amount of your check	_____ \$	

DATE : \_\_\_\_\_

SIGNATURE : \_\_\_\_\_