

## Membership Form Association des familles Lussier

<b>☐</b> New application	☐ Change of given information	<b>□</b> Renewal

	If it	is a change of given info	ormation or renewal: # Member (s)	<b>:</b>
MY INFORMA	TION			
Name:			_ First name:	
Profession or occ	upation:			
			Postal or Zip C	
Phone:	Other p	ohone:	Email:	
Place of Marriage	(if applicable):		D	Pate :
SPOUSE / OTH				
			_ First Name:	
MY PARENTS				
Father's Name:			_ Father's First Name:	
			Mother's First Name:	
MY GRANDPA	RENTS (Lussier li	neage)		
			_ Grandfather's First Name	:
Grandmother's Name:		Grandmother's First Name:		
TYPE OF MEN	IBERSHIP			
	ember 1 year - \$30,0	00	s (couple) 1 year - \$45,00	If you choose 'couple', enter
☐ Individual me	ember 2 years - \$50,	00	s (couple) 2 years - \$75,00	your partner's email address
☐ Corporate me	mber 1 year - \$100	,00		
	Digital version (2 r is published in French. F		☐ Hard copy (2) pour 1 ☐ Hard copy (4) pour 2	
MAKE A DONA	ATION			
☐ Amount - \$10	0,00	Amount - \$25,00	☐ Amount - \$50	0,00
☐ Amount - \$10	00,00	Amount - \$200,00	Amount - \$50	00,00
☐ Donation amo	ount different than	suggested:\$		
☐ Available to ve	olunteer for the asso	ociation		
☐ I am interest	ed in contributing	to the newslette	er of the association	
Additional infor	mation:			
Total : \$				
Signature of the n	nember :		Date :	
☐ I do not want my	personal data to be publ	ished in the database (	of Association des familles Lussier.	

☐ Cheque payment Send your cheque to:

Association des familles Lussier Cheque payable to : Association des familles Lussier

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