



Membership Form

Association des familles Lussier

☐ New application ☐ Change of given information ☐ Renewal

If it is a change of given information or renewal: # Member (s) : _____

MY INFORMATION

Name: _____ First name: _____

Current address: Street : _____

City : _____

Province / State : _____ Postal or Zip Code : _____

Phone: _____ Other phone: _____ Email: _____

TYPE OF MEMBERSHIP

☐ Individual member 1 year - \$30,00 ☐ Members (couple) 1 year - \$45,00

☐ Individual member 2 years - \$50,00 ☐ Members (couple) 2 years - \$75,00

If you choose 'couple', enter your partner's email address

Name: _____ First name: _____ Email: _____

Newsletter : ☐ Digital version included ☐ Hard copy (2) pour 1 an - 15,00 \$

Note that the newsletter is published in French. ☐ Hard copy (4) pour 2 ans - 30,00 \$

MAKE A DONATION

☐ 5,00 \$ ☐ 10,00 \$ ☐ 20,00 \$ ☐ 50,00 \$ ☐ 100,00 \$

☐ Available to volunteer for the association

☐ I am interested in contributing to the newsletter of the association

Additional information : _____

Total : \$ _____

Signature of the member : _____ Date : _____

☐ I do not want my personal data to be published in the database of Association des familles Lussier.

☐ **Cheque payment**

Cheque payable to : Association des familles Lussier

Send your cheque to:

Association des familles Lussier
292 Sainte-Anne

Varenes (Québec) Canada J3X 1R7