

Sydenham Field Naturalists Membership Form

Name _____ Last Name _____

Address 1 _____

Address 2 _____

City _____ Province _____

Postal Code _____

Email _____

Phone (optional) _____

Membership Category (check one)

Single \$20.00

Student \$10.00

Family \$30.00

Tax receipt issued for all donations.

I would also like to give a donation in the amount of \$ _____

Fill out this form and send together with a cheque payable to Sydenham Field Naturalists to:

Sydenham Field Naturalists
Membership Chairperson
PO BOX 22008 Dufferin Ave. Postal Outlet
Wallaceburg, Ontario
N8A 5G4

Comments

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