## Charlotte County Archives Membership Form

Name :				
Address :				
Town:	Prov:	Postal Code _		
Phone Number:Email: You may use my email to inform me of events and activities. Yes 🗌 No 🗌				
I wish to renew my membership: Si This is a new membership: Si I would like to make an additional o	ngle \$25.00□	Family \$35.00 🗆	Sustaining \$1	
I'd like to buy a Single $25\square$ Fa				hip for:
Name:				
Address:				
Town:	Prov:	Postal Code	::	
Phone:	Email:			
Total amount: Cheque	🗆 Cash 🗆	Credit Card (Visa, M	aster Card) 🗆	
Credit Card Number		Expiry	Date:	_cvv
Signature:				
Your membership runs from time of	purchase for or	ne full calendar year.		
As a non-profit organization we rely in helping out, please indicate your a	-		-	
Research Library 🗌 🛛 Tour Guide	Building	Maintenance 🗆	Events 🗆	
If renewing by mail please send to:	123	County Archives Frederick St. ews, NB E5B 1Z1		
Office Use Only: Membership #:	Expiry Date:	Та	x Receipt #:	