
MEMBERSHIP APPLICATION FORM

I hereby apply for one year Membership in Critteraid – The Summerland Cat Sanctuary Society (incorporated in B.C.)

Name: _____

Mailing Address: _____

Street Address (if different from above): _____

City & Postal Code: _____ Phone/Fax/E-Mail: _____

Please find enclosed my Membership Fee: _____\$15.00 Individual _____\$10.00 Student/Senior _____\$20.00 Family

Note: The Summerland Cat Sanctuary Society reserves the right to reject, without explanation, any application for Membership. In such cases, the application fee will be returned.

DONATIONS
GRATEFULLY
ACCEPTED

Please send cheque or money order to:
CRITTERAID – The Summerland Cat Sanctuary Society
Box 235, 113 – 437 Martin St.
Penticton, BC, V2A 5L1

PLEASE DO NOT SEND
CASH
IN THE MAIL
