

VAHC Membership Application

New Membership: _____ Existing Membership Number: _____

First Name: _____ Last Name: _____

Postal Address: _____

City: _____ Province: _____ Postal Code: _____

Contact Number: _____ Email Address: _____

Individual Membership (\$20.00) Family Membership (\$25.00)

Additional Names (Family Membership Only): _____

My main areas of interest are:

As a club member you are expected to assist with the planning, organising and running of club activities. I would like to assist with (Check all that are applicable):-

- Monthly Auctions Annual Auctions Guest Speaker co-ordination
- Write an article for the Fishmonger Printing and distribution of the Fishmonger
- Chair a monthly meeting Co-ordinate club membership
- Organising Summer Social Event Let me know what I can do to help

Other (please specify) _____

YES - I agree to the sharing of my telephone and email address with other club members.

NO - Please do not give out any of my personal details.

(Please circle your response)

Signed: _____

Date: _____

Please submit your payment (Cheques payable to VAHC) to Eileen Partridge, 1098 West 24th St., North Vancouver, BC V7P 2H9

<http://www.vahc.ca>