VEGREVILLE WILDLIFE FEDERATION

MEMBERSHIP FORM

ALL VWF MEMBERSHIPS EXPIRE April 30th/Each year

() \$3 YO) \$70 (EGULAR F	-	() \$85 ASSOCIATE		
() RE	NEWAL () NEW () Male	() Female		
PLEASE CLEARLY PRINT THE FOLLOWING INFORMATION						
Surname			FIRST_			
ADDRESS						
TOWN/CITY				Postal Code	2	
Province		PHC)NE			
EMAIL						
COMPLETE BII	RTH DATE Y	YYY		MM	DD_	
AFGA MEMBE						
FAMILY MEM	BERS (SPOL	JSE/CHILD	REN UND	ER 18)-Firs	t & Last N	ame
SPOUSE			DOB: Y	YYY	_MM	DD
CHILD			DOB: Y	YYY	_MM	DD
CHILD			DOB: Y	YYY	_MM	DD
CHILD			DOB: Y	YYY	_MM	DD
CHILD			DOB: Y	YYY	_MM	DD
CHILD			DOB: Y	YYY	_MM	DD
(office use only)						
CLUB NAME VEGREVILLE WILDLIFE FEDERATION ZONE 5						
SOLD BY						
SELLERS PH#						
DATE SOLD MEMBERSHIP CARD #TOTAL AMOUNT PAID						
PAID BY:						
() Cash Amour () Cheque Am	nt \$					
() Cheque Am	ount\$	Che	eque Numbe	er		
		Member	ship Entry C	nly		
Date Entered into system						
Entered into by_						

YOU MUST ATTEND A RANGE COURSE/ORIENTATION SESSION IF YOU ARE NOT A CURRENT RENEWING MEMBER (1 YEAR LAPSE REQUIRES AN ORIENTATION)

PAYMENT E-TRANSFER TO vegrevillewildlife@gmail.com

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MAIL THIS FORM AND PAYMENT TO THE FOLLOWING ADDRESS.

Vegreville Wildlife Federation PO Box 713 Station Main Vegreville Alberta, T9C1R7

SEE WWW.VWF.CA FOR DETAILS