## **Membership Form**

Effective November 1st - October 31st each year

## Square Butte Community Association

squarebuttehall.com

Member Information					
First name:			Last name:	_	
First name:			Last name:		
Mailing Address:					
	City		Province	Postal code	
Email address (primary):	City		Trovince	r ostar code	
Email address (primary):				Phone	
Email address (alternate):					
				Phone	
I would like to receive emails from the Square Butte Comm			mmunity Yes		
Association about news an	a events.		∐ No	Date	
Membership Rate / P	ayment Inform	ation			
Lifetime Member	FREE		Must be nominated by the Board	of Directors	
Regular Member	\$10.00		Member lives within 25km radius of SBCA Hall		
Regular Family Rate  OR	\$20.00		Includes 2 adults and children und	ler 18	
Associate Member	\$10.00		Member lives outside SBCA bound	daries	
Associate Family Rate	\$20.00		Includes 2 adults and children und	ler 18	
Payment Optio	ons				
Email this form and send e-transfer to:		payments@squarebuttehall.com			
OR		(please include name in comments on e-transfer)			
Mail this form and send a cheque to:		Ш	Square Butte Community Association		
			Box 15, Site 3, RR#1		