



powell street festival society

パウエル祭協会

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MEMBERSHIP FORM

NAME _____

ADDRESS _____

CITY _____

PROVINCE/STATE _____

POSTAL CODE _____

TELEPHONE _____

(home) _____

(work) _____

(mobile) _____

FAX _____

EMAIL _____

Membership: \$12

Donations greatly appreciated! _____

Please note: unless you specify that you wish to remain anonymous, we will acknowledge you as a donor in our next newsletter

TOTAL amount enclosed: _____

Please make cheques payable to: **Powell Street Festival Society**

Membership is from the date of registration; donations are gratefully accepted and a tax-deductible receipt will be issued for the amount over and above the membership cost.

Please mail this form and your cheque to:
Powell Street Festival Society
Suite 370, 425 Carrall Street
Vancouver, BC Canada V6B 6E3