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|  | ArecaLogoOffice.png | | |
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|  | **ARECA MEMBERSHIP 2024** | | |
|  | *Please print:* | |  |
|  | Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | **EMAIL LIST** |
|  | Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Yes, add me to the list. |
|  | Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |
|  | E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
|  | Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |
|  |  | |  |
|  | Household: $20.00 | |  |
|  | Senior: $10.00 | |  |
|  | Donation $ \_\_\_\_\_\_\_\_ | |  |
|  | **Total: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |  |
|  |  | |  |
|  | Method of Payment: Cheque Cash | |  |

Please return this form with payment to:  
ARECA, c/o 23 Elwood Blvd., Toronto, ON M4R 1B8