

28 West Pender Street
 Vancouver, B.C. V6B 1R6
 Tel (604) 408-7249 Fax (604) 408-7236

Life Membership Registration

MEMBERSHIP CATEGORIES

Please check the appropriate box

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Individual | Minimum donation \$2,500 |
| <input type="checkbox"/> Couple | Minimum donation \$3,000
(Please each fill out a form) |
| <input type="checkbox"/> Corporate | Minimum donation \$5,000 |

* Tax receipt will be available for your donation

Please print

Family Name	First Name
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Name of Organization or Corporate

Sex M F

(Not applicable for Corporate Members)

M

D

Y

Date of Birth (Date incorporated)

Occupation

(Nature of the Organization or Corporation)

Address

(Please specify name of contact person if Corporate Member)

Postal Code

Residence Telephone

(not applicable for Corporate Members)

Office Telephone

Residence Fax

(not applicable for Corporate Members)

Office Fax

E-mail

Referred by

Family Name

First Name

S.U.C.C.E.S.S. respects the privacy of its members. We collect and use members' information solely for administering the membership program within S.U.C.C.E.S.S. organizations and we will not disclose members' information to any third party without members' consent.

I give consent to S.U.C.C.E.S.S. to collect and use my personal information / the corporation's information solely for administering the membership program within S.U.C.C.E.S.S. organizations.

Signature

Date Registered