



Membership Registration Form
September 1, 2019 to August 31, 2020

New
 Renewal
 Change of Address

Name:	
Email Address:	
Phone Number:	
Home/Mailing Address:	
Anti-Spam Law: *must choose one*	Do you want to subscribe to EAD's email distribution for events, meeting reminders/notifications and any other information? <input type="checkbox"/> YES <input type="checkbox"/> NO (checking this means you will not receive emails from EAD)

Active or Associate Member for Adult				
<input type="checkbox"/>	Adult (age: 31-54)	\$25.00	X	Total: \$ _____
<input type="checkbox"/>	Family Membership with (name of under 18 year old child(ren))	\$25.00	X	Total: \$ _____

Active or Associate Member for Senior Citizen				
<input type="checkbox"/>	Senior Citizen (age: 55+)	\$15.00	X	Total: \$ _____

Active or Associate Member for Youth				
<input type="checkbox"/>	Youth (age: 18-30)	\$15.00	X	Total: \$ _____
<input type="checkbox"/>	With a photocopy of a current Student ID (Student or Dependant)	\$15.00	X	Total: \$ _____

Methods of payment: Cash, Cheque, and E-Transfer to (eadtreasurer7@gmail.com)

Please submit your completed membership form with payment by email or mail the completed membership form with payment to EAD at the address below:

Edmonton Association of the Deaf
 Attn: Membership Director
 #203, 11404 – 142 Street
 Edmonton, Alberta T5M 1V1
 Email: eadmembership@gmail.com

