2024 Annual Membership Form CHEMAINUS VALLEY HISTORICAL SOCIETY

Please MAIL your **form and payment** to the Chemainus Valley Museum. Box 172 Chemainus, BC VOR 1K0

OR <u>E-MAIL</u> your <u>updated contact information</u> and pay via E-Transfer to cvhsMuseum@shaw.ca

Thank you for your support!

Renewals due by Jan. 31, 2024

Name(s):			
Address:		Postal Code:	
Tel:	Email Address:		
Membership Category: Check	one only please and inc	dicate if receipt is required. (fees are in CAN funds)	
☐ Single Membership	\$15.00	☐ Business Membership \$40.00	
☐ Family Membership	\$25.00	□ Receipt Required	
Additional Donation \$ Payment Method (please check one)	Total Paid \$	Date Paid	
□Cash □Credit (in person on	ly) □E-Transfer (above	email)	
Are you able to Volunteer?			
Do you have any skills or interes	ts which you are willing	to share?	
		Receipt #	