

## **MEMBERSHIP FORM**

All memberships are in effect yearly from January 1st to December 31st.
\*New members, payments made prior to January 1st will be retroactive (e.g. will apply to year of payment)

Please enroll/renew me as a member of the Manitoba Archaeological Society (\*required fields):

First Name:*			Address:*	
Last Name:*			City:*	
Phone:*			Province/State*:	
Fax:			Postal Code/Zip Code:*	
Email:*				
Do you wish to re	ceive an electronic	copy of Mai	nitoba Archaeological Newsletter?  Yes No	
I am applying or r	enewing an annua	l membersh	ip and agree to abide by the aims and objectives to the M.A.S	
Membership T	ype:			
Check Box	Check Box		Student number	
Renewal	☐ Student	\$30.00	and Institution:	
☐ New	☐ Individual	\$45.00	Do you require a receipt?   Yes   No	
	☐ Family	\$50.00		
	☐ Institution:	\$60.00		
Paymen	ts may be made to t	the Manitoba	a Archaeological Society via <u><b>cheque</b> o</u> r <u>money order</u>	
DONATIONS				
I wish to make a d	donation to the Ma	nitoba Archa	aeological Society of: \$	
			is a sure of a sure of 10,00 in addition to use of sure beautions as a	

You will be sent an income tax receipt for any donations made over \$10.00 in addition to your membership payment.

## **Privacy Statement:**

The Manitoba Archaeological Society complies with the Protection of Personal Information and Electronic Documents Act and will maintain the confidentiality of each member's file. The personal data, including name, address, telephone number, email address and other pertinent information will not be provided to any outside agency. By submitting this application form you are authorizing the Manitoba Archaeological Society to maintain your personal data on file.

Please mail this form with your enclosed payment to:

The Manitoba Archaeological Society P.O. Box 1171 Winnipeg, Manitoba R3C 2Y4