



NEW RENEWAL

Membership and Donation Form

Working *together* to *protect* the *health* of our oceans and coastal communities

CONTACT INFORMATION

Name: _____

Address: _____ Unit #: _____

City: _____ Province: _____ Postal Code: ____ - ____

Phone: _____ Email: _____

I wish to receive the regular e-News updates, when available YES NO

Be a Sustaining Member! As a monthly Pre-Authorized Contributor, you don't have to remember to renew. You can change your contribution at any time. You can contribute monthly either directly from your bank account (which lowers our administrative costs) or from your credit card.

Monthly Contribution: \$ _____

One Time Donation: ___\$500 ___\$365 ___\$240 ___\$180 ___\$120 ___\$60 ___\$40 ___\$25

Other Amount: \$ _____

PAYMENT METHOD

Void Cheque Visa MasterCard

I would like to contribute MONTHLY ANNUALLY through my bank account:

I have enclosed a VOID blank cheque to contribute directly from my bank account.

Name of Bank: _____

Address of home branch:

Bank number: ____ ____ ____

Transit number: ____ ____ ____ ____

Account number: ____ ____ ____ ____ ____ ____

Signature: _____ Date: _____

I would like to contribute MONTHLY ANNUALLY using my credit card:

3-digit CVC: _____

Credit Card: _____ Expiry Date: __/____

Name on Card: _____

Signature: _____ Date: _____

Your privacy is important to us. Your information will only be used for the purposes authorized in this form.