



# 2019 MEMBERSHIP DUES

Children (12 and under): *free!*

Youth (13-17): **\$15 if purchased prior to or at the May 14th general meeting**, \$20 if purchased May 15th or later

Adult: **\$20 if purchased prior to or at the May 14th general meeting**, \$25 if purchased May 15th or later

Senior (65+): **\$15 if purchased prior to or at the May 14th general meeting**, \$20 if purchased May 15th or later

## Cheques to be made payable to **Western Ontario Steam Threshers Association** 2019 Membership Dues are payable by May 14<sup>th</sup>, 2019

*Membership Information - Please Print:*

	Child <i>free</i>	Youth \$15*	Adult \$20*	Senior \$15*
Member Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*\*Add \$5 if  
after May  
14<sup>th</sup>*

Address: \_\_\_\_\_  
(Street # & Name) (City & Postal Code)

\_\_\_\_\_ Phone # Email Address

**Newsletter Preference: Email \_\_\_\_\_ Mail\* \_\_\_\_\_ No Newsletter \_\_\_\_\_**

\* please include an additional \$5 with your membership if you'd like to receive newsletter by mail

*I acknowledge and agree that the submission of this membership information constitutes my consent to the collection, use and disclosure by the Western Ontario Steam Threshers Association of the information submitted in this Information Form. I understand that the collection, use and limited disclosure of any personal information will only be for the purposes of fulfilling the WOSTA mandate.*

\_\_\_\_\_  
Signature of Member (18 yrs & over)

\_\_\_\_\_  
Signature of Member (18 yrs & over)



Please complete this form and mail it, together with your cheque, to  
Western Ontario Steam Threshers Association  
Carole Danby-Searson, 239 Oslo Crescent, Sarnia, ON, N7S 4J3

