

Bibliothèque et centre d'informatique
Atwater
Library and Computer Centre

New Membership Membership Renewal

Date: _____

Membership # MO _____

Mr. **Mrs.** **Ms.** **Miss** **Dr.** **Other:** _____

Name: _____

Address: _____ **City:** _____

Postal Code: _____ **Telephone:** _____

Email: _____

- | | | | |
|--|-----------|--|-----------|
| <input type="checkbox"/> Three months | \$10 | <input type="checkbox"/> Quebec Writers' Federation members | \$20/year |
| <input type="checkbox"/> Six months | \$20 | <input type="checkbox"/> RECLAIM Literacy members | \$10/year |
| <input type="checkbox"/> Seniors (60+) | \$20/year | <input type="checkbox"/> Former residents of Y refugee residence | \$10/year |
| <input type="checkbox"/> Students | \$25/year | on Tupper St. (one-year limit) | |
| <input type="checkbox"/> Regular | \$35/year | <input type="checkbox"/> Life Membership | \$500 |

Donation: Please accept my charitable donation to support the Atwater Library's operations.

- \$50 \$100 \$250 other _____ (Tax receipts issued for \$15+)
 Check this box if you wish your donation to be anonymous.

Total Membership Fee and Donation \$ _____

Cash Cheque Credit (Slip) Credit (Square)

I would like to receive the **Library's e-newsletter** with information on events and programs.

- Yes, at this email address: _____
 No

How did you hear about the Atwater Library and Computer Centre?

Friend Library Website Facebook Instagram Newspaper Radio

If other: (please specify) _____

Thank you for supporting the Atwater Library and Computer Centre!

For office use only:
Volunteer name: _____