

Bibliothèque et centre d'informatique
Atwater
Library and Computer Centre

New Membership Membership Renewal

Date: _____

Membership # MO _____

Title and/or Pronouns: Mr. Mrs. Ms. Miss Dr.

She/Her He/Him They/Them 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

Please note **we cannot process debit payments**

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: _____