



St. Vital Agricultural Society
Membership Form

(PLEASE USE ALL CAPITAL LETTERS EXCEPT EMAIL ADDRESS)

Name:

Address:

City: Prov. Postal Code:

Phone: Cell:

Email:

Yearly membership is Adult: \$10.00 Junior (16 and under) \$3.00

Method of payment: Cash Cheque E-Transfer

Payment by e-transfer to be made by email to St. Vital Agricultural Society:

treasurer@svas.ca

Membership questions can be directed to MD ENAMUL HOQ (431-275-3241)

Privacy consent: Any personal information you provide will be for internal SVAS purposes only. This information is mainly used to communicate with the membership. You will get our newsletters if they you provide us the email address to send it to.

Check this box to indicate Acceptance of the Terms above.

Send the completed form to: treasurer@svas.ca

For Office use only: Member #: Date:

Membership Certificate

This certifies that:

Name:

is a member of the

St. Vital Agricultural Society

For the Year:

Adult: Junior:
