



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: <input type="text"/>
is a member of the	<i>St. Vital Agricultural Society</i>
For the Year: <input type="text"/>	Adult: <input type="checkbox"/> Junior: <input type="checkbox"/>