



Lions of B.C. Hearing Conservation Society



FORM 402

RENEWAL OF MEMBERSHIP

I, _____ wish to renew my MEMBERSHIP

For a period of two years - effective 1 July, _____.

I confirm that I am a Member in Good Standing of the MD 19 Lions/Lioness Club:
_____ in District-Zone _____.

My address: _____

City: _____ Prov: _____ Postal Code: _____

Phone: _____ Fax: _____

Email: _____

I am willing to attend Annual Meetings and continue to be involved in the Hearing Society and the work it does for the Hearing Impaired of British Columbia.

Date: _____ Signature: _____

As President/Secretary of the _____ Lions/Lioness Club,

I confirm that Lion/Lioness _____ is a Member in Good Standing, is recommended for Membership, and who may be our Representative or Liaison in the **Lions of BC Hearing Conservation Society**.

Enclosed is:

- A) \$ 20.00 in payment of this Lion's/Lioness's Membership; OR
- B) Our Donation to the Lions of BC Hearing Conservation Society of
\$ _____.

Name: _____ Signature: _____

(please print)

Date: _____

Please mail completed application to:

LION Bob JONES, Treasurer

LIONS OF B.C. HEARING CONSERVATION SOCIETY

38 7600 Chilliwack River Road

Chilliwack, BC V2R 3Z6

Amended FEB 2019