



Application for New Members
Change of Info for Renewing Members
01 September 2019 – 31 August 2020

Member 1 Name: _____

Email address: _____

Member 2 Name: _____

Email address: _____

For **New Members** Only (or to note changes in information)

Address Apt/Unit: _____ Street Address _____

City: _____ Postal Code: _____

Phone No.: (613) _____

Birth Month & Year (CONFIDENTIAL: for funding statistics only)

Member 1: Month _____ Year: _____

Member 2: Month _____ Year: _____

Membership Fee: **\$50** per person. Please make cheque payable to AJA 50+.

If you are sending **this form only**, please attach cheque and send to: Dan Sigler
56 Charing Rd.
Ottawa ON K2G 4E8

If you are **including a program registration form** with this form, please attach cheque for combined amount, and send to: Flo Morgan
59 Beaver Ridge
Ottawa ON K2E 6E2