



OFFICE USE	
Membership #.....	
Date of Purchase:.....	
Expiration Date:.....	
Staff:.....	

CHOOSE THE RIGHT MEMBERSHIP CATEGORY FOR YOU.

Individual Annual		\$40
Family Annual (up to 2 adults, 4 children up to 18 years old)		\$60
Student Annual (student is 12+)		\$25
Senior Annual		\$35

PRIMARY CARDHOLDER

Name	Email
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CONTACT INFORMATION

Address	City	
Telephone	Province	Postal Code

ADDITIONAL CARDHOLDERS (if applicable)

Name	Email

IS THIS MEMBERSHIP A GIFT? How thoughtful! Please indicate the name that should appear on the card.

Name	Email
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PAYMENT INFORMATION

Credit Card Type (check one) Visa MC Expiry Date:

Credit Card #: Signature:.....

Name on Card:.....

OR Cash Cheque Debit

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