

**Association of Canadian Women Composers
L'Association des femmes compositeurs canadiennes**

Membership Record for 20__ - 20__ ⁽¹⁾

New Member ____ or Renewing Member ____

PERSONAL INFORMATION :

Name: _____

Title: Dr. ____ Ms. ____ Mrs. ____ Miss ____ Mme. ____ Other ____

Address: _____

Telephone/FAX: () _____

Email: _____

Website: _____

Send Bulletin by Email ____ **by Regular Mail** ____

CURRENT MEMBERSHIP DUES:

(For office use only)

- **Active (\$40)** ____
(Woman composer, Canadian citizen/landed immigrant, voter)
- **In-training/Student (\$25)** ____
(Woman composer, enrolled in a study programme, non-voter)
- **Affiliate (\$35)** ____
(Non-Canadian woman composer, non-voter)
- **Associate (\$35)** ____
(Individual supporter/organization, non-voter)

Cheque received _____
Cheque number _____
Cheque deposited _____

Receipt issued _____
Receipt number _____
Receipt sent _____

- **Total Dues Payment Enclosed: \$** _____

Initials _____

NOTES:

(1) Membership dues are payable annually on July 1 (i.e. for period July 1 to June 30)

(2) Please make your cheque payable to ACWC/AFCC

(3) Send your cheque and completed Membership Record to:

Joanna Estelle, Treasurer ACWC/AFCC

100 Boteler Street, Unit 505

Ottawa, ON K1N 8Y1

(4) All information provided is confidential and for the use of ACWC/AFCC only

ACWC/AFCC Website: www.acwc.ca