



MEMBERSHIP FORM

Please fill out the following:

Name /Organization: _____

Contact Person: _____

Address: _____

City: _____ Prov.: _____ Postal Code: _____

Phone: (H)(____) _____ (C)(____) _____ (W) (____) _____

E-mail: _____

Signature: _____ Date: _____

Annual membership fees are due in June of each year, currently at the rate of \$50.00* for a Group and \$20.00 for an Individual.

*For Multilingual Schools with less than 40 students, the membership fee will be \$30 for the year

Payments of cash or cheque will be accepted on or before the day of the Annual General Meeting.

A MEMBERSHIP FEE OF: (Please circle) \$50.00 / \$30.00* / \$20.00 IS ENCLOSED

Please return this form along with your payment to:

Saskatchewan Intercultural Association
601B 1st Avenue North
Saskatoon, SK. S7K 1X7

*** For SIA Office Use Only ***

Fiscal Year of Membership being paid: _____ Date Received: _____

Received By: _____

Signature: _____