



Little People of British Columbia

Society for Short Stature Awareness

Membership Application for 2010-2011

Date: _____ New: _____ Renewal: _____

Applicant:

Applicant Surname: _____ First Name: _____ Initial: _____

Age: _____ Date of Birth: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

Residence Phone: _____ Mobile Phone: _____

E-Mail Address: _____

Type of Short Stature: _____ Height: _____

Other Family Members: Parent(s), Spouse, Brother(s), Sister(s) etc.

	Family Member #1	Family Member #2	Family Member #3	Family Member #4
Name				
Relationship				
Short Statured				
Average Statured				
Date of Birth				

Membership Type: (Yearly memberships run from June 1 to May 31)

Family: \$25.00 per year (Short Stature adult or child & immediate family)

Single Adult: \$20.00 per year (18 years of age or older)

(Above memberships include quarterly newsletter subscriptions)

Newsletter Subscription Only: _____ (\$10.00 per year)

Note:

All applications are reviewed for acceptability as per the membership requirements in our constitution. If rejected, your membership fee will be returned in full.

Donations: \$5 \$10 \$20 \$25 \$50 \$100 Other: _____

Donations will be placed into the LPBC General Account to be used to better serve our members. All donations are appreciated and tax receipts will be issued.

Please mail form and cheque to:

Little People of British Columbia
Box 4280
Vancouver, BC V6B 3Z7

Make cheques payable to:
Little People of British Columbia

Office Use Only:

Cheque # _____ Amount _____

Postings:

Membership Yr 10-11