

## 26 Mill St, Gananoque, ON K7G 3A6

## **Membership Form**

Date:	Please PRINT clearly;
INDIVIDUAL MEMBER	
First & Last Name	
Phone:cell_	
Address:	Apt#:City:
Postal Code:	
Email:	
Membership Fees and Paym	ent
Individual 1 year \$35	
Email to gananoqueseniorsa	ssociation@gmail.com with eTransfer
<u>Or</u>	
drop Cheque or Cash at Con	nmunity Living Centre 26 Mill St, Gananoque.
Please let us know that you h	nave left it in mail slot at the side door26 Mill St so we can pick it up.
<b>Emergency Contact</b>	
Name:	Relationship:
Phone (home)	(work)
Phone (cell)	Email:
Programs that interest you_	
Need help or questions? Call	Don Matthews 613 532-9595