

LDDHS MEMBERSHIP REGISTRATION

Surname: _____

First Name: _____

Address: _____

City: _____

Postal Code: _____

Phone: _____

Bus. Phone: _____

E-Mail: _____

Signature: _____

Date: _____

MEMBERSHIP TYPE: please check appropriate box:

- FULL \$90.00 Includes meetings & Holiday Dinner
- PAY AS YOU GO \$30.00 Per meeting, Payable at the door
- HOLIDAY DINNER \$55.00 Payable by November 1st
ONLY

Please Note:

**Registrations will be received at the first meeting if not mailed prior
Cash or Cheque only.**

Mail to:

Caroline Lotz 377 Cheapside Street, London, ON N5Y 3W9