JAPANESE CANADIAN CULTURAL CENTRE
日系文化会館

6 Garamond Court
Toronto, ON M3C 1Z5
www.jccc.on.ca

MEMBERSHIP APPLICATION

Name: Mr/Mrs/Ms/Dr _____

Address: _____ Apt. No. _____

City: _____ Prov. _____ Postal Code _____

Home Tel: _____ Bus. Tel: _____

E-mail: _____

Signature: _____ Date: _____

**Family applications, please complete the following:*

Spouse's Name: _____

Names of Children — Dates of Birth:(MM/DD/YY)

1. _____ / / _____

2. _____ / / _____

❏ I would like to receive Planned Giving/Estate Planning Information

❏ New Member ❏ Renewal in the following category:

Regular Member

❏ Individual (18 and over)	$33.90/yr
❏ Family* (incl. Children 17 and under)	$56.50/yr

Senior Member

❏ Senior (65 and over)	$22.60/yr
❏ Senior Family*	$39.55/yr

Above fees include HST

Supporting Member (includes applicable membership due, please indicate membership category from above)

❏ Partner	$150/yr
❏ Leader	$500/yr
❏ Ambassador	$1,000/yr

I'd like to receive the newsletter by:
❏ e-mail (valid e-mail address required) ❏ regular mail

In addition to my membership fees,
Please accept my donation of $ _____
A charitable receipt will be issued for donations over $10.00

I have enclosed
❏ a cheque ❏ VISA ❏ MC ❏ Amex for $ _____

VISA/MC/Amex card # — expiry date

(Cardholders may also register by fax 416-441-2347 or phone 416-441-2345)

FOR OFFICE USE ONLY

MEMBERSHIP NO. _____ EXPIRY DATE _____ RECEIPT NO. _____ AMOUNT _____ DATE _____

REGISTERED CHARITY # 118972967RR0001