

P.O. Box 1030, Ladysmith, BC V9G 1A7 admin@lmsmarina.ca www.lmsmarina.ca

LMS Membership Form

	Ne	ew Member(s) Renewal	
Name(s):				
Is this a Family	membership?	lf so, please in	dicate names and ages of	children under 19:
Child's Name: _		Age:	_ Child's Name:	Age:
Child's Name: _		Age:	_ Child's Name:	Age:
Mailing Addres	s:			
Phone Number	r(s):			
Email:				
l grant permiss	ion for LMS to	publish my inf	ormation in its annual ros	ster:
Yes	No			
Participation le	vel (please sele	ect one):		
Membe	rshin Only	Member	ship & Volunteer	

ANNUAL DUES: Single \$20 ~ Couple \$35 ~ Family \$50 ~ Youth (<19) \$5 Please e-transfer dues to accounting@lmsmarina.ca or pay by cash/cheque at any LMS event.

FOR OFFICE USE	DATE PAID	AMOUNT PAID	CASH CARD CHQ# EFT#		
POS RECEIPT #	APPROVED (DATE & SIGNATURE)				
MMS PAYMENT	VOLUNTEER	OTHER	LETTER & CARD SENT		