



Membership Registration Form

Name: _____

Address: _____

City: _____ Province: _____

Postal Code: _____ Telephone (Home) : _____

Telephone (Business) : _____ Cell: _____

E-mail: _____

Preferred method of correspondence? Example: membership renewal reminders

Email Paper

A membership is valid for one calendar year. The membership fee for each member is \$15 per person or \$20 per family.

Expires: One year from date of purchase

Donations are welcome! The Transcona Museum is a non-profit, charitable organization. Tax receipts will be issued for donation over \$50 or by request. The Transcona Museum is a registered charity (119268449 RR0001)

GIFT DESIGNATION

- Collections and Conservation Exhibition Planning and Production Programming
- General Development Fund Other _____
- CN 2747 Preservation

GIFT RECOGNITION

- You may list my (our) name(s) in any published donor listing.
- I would like my name to remain anonymous.
- I would like to name my gift:

In Memory Of: _____ **In Honour of:** _____

If you would like an acknowledgment card sent, please provide their name/address:

Recipient's Name _____

Address _____

City / Province _____ Postal Code _____

Would you like to volunteer at the Museum? (Yes) (No)

DONATION \$ _____

MEMBERSHIP FEE \$ _____

TOTAL AMOUNT ENCLOSED \$ _____

Please complete this form and return with cheque to:

Transcona Museum
141 Regent Avenue West
Winnipeg, Manitoba R2C 1R2