



# EMUNAH WOMEN OF CANADA

## Membership

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Husband's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Prov. \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone # \_\_\_\_\_ Email address: \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Chapter \_\_\_\_\_

Annual Membership Fee: \$36.00 \_\_\_\_\_

Life Membership Fee: \$250.00 \_\_\_\_\_

Fax or Mail in Completed form to the National Office.  
Emunah Women of Canada  
7005 Kildare Road, Suite 18  
Montreal, Quebec  
H4W 1C1  
Fax: (514)-483-3624