

Winnipeg Robert Burns Club“197 Application for Membership

PLEASE PRINT

Date: _____

Name: _____

Address _____

Phone: _____ Fax: _____

Email: _____

<p>Club Use only</p> <p>Proposed by: _____</p> <p>Seconded by _____</p> <p>Date of Acceptance: _____</p>
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Membership is to be forwarded sent application. To
Box P.O. Box 2584
Winnipeg MB
R3C 4B3

This fee is for one year commencing in October of each year. Luncheon and annual supper costs are extra.

Cheques should be made payable to:

The Winnipeg Robert Burns Club