

**SCAN** and email your form to: **Admin@Wally4Leader.ca** 

*OR FAX* to: **1 (888) 497-4759** 

Office Use Only

## **PC Party MEMBERSHIP APPLICATION (Please Print)**

Constituency Name (optional):			New Re	enewal	☐ Mr.	☐ Mrs. ☐ Ms.		
First Name:	Middle Initial:	Last Name:		Da	ate of Birth:	day / month / year		
Residential Address:		City/Town	:		Posta	al Code:		
Mailing address (if different):		City/Town	:		Posta	al Code:		
Section/Township/Range:		Home Phone:	Ви	Business Phone:				
eMail:		Recruiter's Name:						
MEMBERSHIP PRICE:	\$20.00 (Members	hip will be valid through	December 31st in the ye	ear of the n	ext Provincia	General Election)		
Additional Household Members*:								
Name:	eMail:			M/F Da	ate of Birth:	lay / month / year		
Name:	eMail:			M/F Da	ate of Birth:	lay / month / year		
Name:	eMail:			M/F Da	ate of Birth:	lay / month / year		
Name:	eMail:			M/F Da	ate of Birth:	lay / month / year		
			Tota	l # of Meml	<b>x 20</b> : berships	Total Amount		
I WOULD LIKE TO VOLU	JNTEER: ■							
Check the box above if you would life for involvement as a volunteer.	ike to volunteer to help (	get Wally elected as our p	arty leader; you will be	contacted l	by email with	details on options		
(along with cheque or money order.			HOD OF PAYMENT: (pe	DD OF PAYMENT: (personal cheques payable to <i>PC Party of Manitoba</i> )  Cheque Credit Card				
Wally Daudrich Campaign PO Box 18, Stn Main Morden, MB R6M 1A2			Card Number		J Credit Card			
Oi	?							

## Thank you for your support!

Cardholder's Name

Cardholder's Signature

Please note that memberships must be paid for with personal funds (personal credit card, personal cheque, etc.) Membership fees are non-refundable. Tax receipt wil be issued at end of current year.

\*If paying for more than one membership in a household with the same cheque or credit card, I certify that: each of the members is a member of my family and related to me and comply with the above conditions of membership. Each membership paid for by my cheque or credit card has been bought with funds belonging to each of the new or renewing members and with their consent.

By attaching payment I certify that I am a resident of Manitoba, I actively support the principles of the Progressive Conservative Party of Manitoba and I am at least 14 years of age.