

Full Membership Benefits:

Access to Meetings	Education Materials, Posters
Voting Privileges	Group Support

JOIN EHA-AB

- Complete the form below or join online.
- Make cheque out to EHA-AB.
- Mail to: **EHA-AB P.O. Box 25 Main, Edmonton, Alberta, T5J 2G9**

If you would like more information or have questions, please contact us at (780) 289-5719 or on the web at www.eha-ab.ca.

Membership Types

Full Membership -Pro-Rated (See Table Below)

Nov	Dec	Jan	Feb	Mar	Apr
\$25	\$23	\$21	\$19	\$17	\$15
May	Jun	Jul	Aug	Sep	Oct
\$13	\$11	\$9	\$7	\$5	\$28

Associate Membership - \$5 (Support EHA-AB's Objectives. Includes No Benefits)

*Special consideration given to those on fixed incomes. Please inquire.



Date: _____

Name: _____

Address: _____

Postal Code: _____

Phone: _____

Email: _____

New Member ____ Renewal ____

(Membership year is from November 1 to October 31)

We appreciate your generosity. EHA-AB is a non-profit organization. Your donations are welcome.