

MEMBERSHIP

As a member, I am helping to support the work of the Victoria Brain Injury Society (VBIS).

Some of the member benefits I will receive include:

- *The Reminder*, our quarterly newsletter, filled with information about VBIS programs, special events and the latest brain injury news happening in the community
- A vote at our Annual General Meeting
- Invitations to our special events
- Volunteer opportunities, and more!

I understand that provision of services **does not** depend on paid membership.

Name _____

Address _____

City _____

Postal Code _____

Telephone (home) _____

Telephone (work/cell) _____

Email _____

I would like to receive the quarterly "*The Reminder*" newsletter and any VBIS updates by:

- | | |
|--|---|
| <input type="checkbox"/> Email (to the address shown above) | <input type="checkbox"/> Mail (to the address shown above) |
| <input type="checkbox"/> Pick it up at the Victoria Brain Injury Society | <input type="checkbox"/> Please do not send the newsletters/updates to me |

Suggested Membership Contribution (please check one):

- | | |
|--|---|
| <input type="checkbox"/> Individual - \$10.00 | <input type="checkbox"/> Family - \$25.00 |
| <input type="checkbox"/> Professional - \$100.00 | <input type="checkbox"/> Corporate - \$400.00 |

Please Note: Each membership equates to *one vote* at the Annual General Meeting (eg: a family of four will receive *one vote*)

- Please find my cheque, made payable to "Victoria Brain Injury Society," attached
- Please find cash attached
- Please charge my Visa MasterCard # exp

Signature Date

Please Note: All donor information held on record by the Victoria Brain Injury Society (VBIS) is for the sole use by VBIS management and administration only, and will not be shared with other parties.

OFFICIAL USE ONLY:

Processed Date: Cash Credit Card Cheque #

Statement # Account # Initials

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www.vbis.ca Charity #122452121RR 0001