

# 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:

- Email (to the address shown above)       Mail (to the address shown above)  
 Pick it up at the Victoria Brain Injury Society       Please do not send the newsletters/updates to me

Suggested Membership Contribution (please check one):

- Individual - \$10.00       Family - \$25.00  
 Professional - \$100.00       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