



Canadian Mental Health Association
 Haliburton, Kawartha, Pine Ridge
Mental health for all

Membership Form

Thank you for your interest in membership with the Canadian Mental Health Association, Haliburton, Kawartha, Pine Ridge (C.M.H.A. H.K.P.R.).

I wish to become a member of C.M.H.A. H.K.P.R.

I wish to renew my membership.

Year of Membership:

Please choose the appropriate membership:

Corporate - \$50.00

Non-Profit - \$25.00

Family - \$35.00

Individual - \$25.00

Student - \$5.00

Fixed Income - \$1.00

Name:

Organization:

Address:

City:

Postal Code:

Telephone:

Email:

Payment type: Cash Cheque Credit (Fill below) Online (See instructions)

Cardholder Name:

Card Type:

Credit Card #:

Expiry – MM/YY:

Tick to indicate you have made your payment online at Canadahelps.org: **www.canadahelps.org/dn/4840**

Please Note: This form must still be completed and submitted for membership processing.

Please send completed form, or direct questions to: Kerri Davies, Manager of Community Engagement

C.M.H.A. H.K.P.R. kdavies@cmhahkpr.ca | 705-748-6687 extension 1048 | Fax: 705-748-2577

415 Water Street, Peterborough, ON K9H 3L9

For Office Use Only: Membership Processed On _____