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McCreary Centre Society



Membership Form

I would like to obtain/renew my 2012-2013 membership to the McCreary Centre Society.			
<input type="checkbox"/> New Membership		<input type="checkbox"/> Renew Membership	
Name			
Address			
City		Province	
Phone		Postal Code	
Email			

Donation Form

Society

McCreary Centre



YES! I would like to help the McCreary Centre Society to increase the knowledge of youth health issues in BC and support youth leadership in our province.

Name			
Address			
City		Province	
Phone		Postal Code	
Email			
Enclosed, please find my donation of:			
<input type="checkbox"/> \$50 <input checked="" type="checkbox"/> \$75 \$100 <input type="checkbox"/> \$150 <input type="checkbox"/> Other \$ _____ <input type="checkbox"/>			
Monthly Gift Club			
I understand the need for ongoing support and would like to become a monthly supporter.			
<input type="checkbox"/> Enclosed are my # _____ post dated cheques of \$ _____ <input type="checkbox"/> Please contact me about making a donation through life insurance or my will			
Please include your gift and information and return this form to: McCreary Centre Society (Registered Charity # 129218632 RR0001) 3552 East Hastings St. Vancouver, BC V5K 2A7			

A tax receipt will be issued to acknowledge your generosity. Thank you for making a difference in the lives of young people in BC.