



# Registration Form

Renewal

New Member

Gift

Name of cardholder: \_\_\_\_\_  
 Ms.    Mrs.    Mr.    Dr.

Address: \_\_\_\_\_

City, Province, Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Year of Birth *(for statistics only so that we may improve our programs and activities)*: \_\_\_\_\_

Email: \_\_\_\_\_

**If a gift, purchased by:**

Name: \_\_\_\_\_  
 Ms.    Mrs.    Mr.    Dr.

Address: \_\_\_\_\_

City, Province, Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Please make the gift start on:    December 26    January 1st    later: \_\_\_\_\_

Please send me this gift and I will give it to the Member.    Please send this gift to the Member.

**Other names in membership:**

Cardholder's spouse: \_\_\_\_\_

Extra adult: \_\_\_\_\_ Extra adult: \_\_\_\_\_

Child 1: \_\_\_\_\_ Child 2: \_\_\_\_\_

Child 3: \_\_\_\_\_ Child 4: \_\_\_\_\_

\*Child 5: \_\_\_\_\_ \*Child 6: \_\_\_\_\_

*Please include children's year of birth.*

*Please be sure to include your email address to receive our electronic bulletin and invitations.*

*Thank you for filling out all fields.*



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## Membership Price Grid

Please indicate your choice	DUO		SOLO**	
	One year	Two years	One year	Two years
Seniors	<input type="radio"/> \$55	<input type="radio"/> \$99	<input type="radio"/> \$45	<input type="radio"/> \$90
Students	<input type="radio"/> \$55	<input type="radio"/> \$99	<input type="radio"/> \$45	<input type="radio"/> \$90
Adults	<input type="radio"/> \$85	<input type="radio"/> \$140	<input type="radio"/> \$75	<input type="radio"/> \$120
Families*	<input type="radio"/> \$99	<input type="radio"/> \$170	<input type="radio"/> \$90	<input type="radio"/> \$150
Grandparents	<input type="radio"/> \$99	<input type="radio"/> \$170	<input type="radio"/> \$90 OR	<input type="radio"/> \$150
Patron Circle*	<input type="radio"/> \$150	-	<input type="radio"/> Canadian Museum of Civilization	
Honour Circle*	<input type="radio"/> \$300	-	<input type="radio"/> Canadian War Museum	
Curator Circle*	<input type="radio"/> \$600	-		

Prices in effect as of January 1, 2005 and subject to change without notice. Tax regulations do not allow us to issue tax receipts for membership fees. Note: Memberships are non transferrable or refundable.

\* Families and Circles: 2 adults and 4 children at the same address. Additional members: \$10 per adult; \$ 5 per child, per year. Restrictions apply. Please verify with the Membership Desk.

\*\* Solo membership privileges apply only to the chosen Museum.

Correspondence in:  English  French

### Donations

Yes, I would like to support the Museum \$ \_\_\_\_\_ (a tax receipt will be issued for this amount only).

### Payment

Cheque (payable to the Canadian Museum of Civilization)  MasterCard  Visa  American Express

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Total Payment: \$ \_\_\_\_\_ (including additional members and donations).

Signature: \_\_\_\_\_

Please mail your form to:

Membership Program  
Canadian Museum of Civilization Corporation  
100 Laurier Street  
Gatineau, Quebec K1A 0M8

You can also fax it to 819 776-7060.

We value your comments and questions; please contact us at [membership@civilization.ca](mailto:membership@civilization.ca) or dial 819 776-7100 and leave a message.