**SLEAC Membership Renewal Form 2024-2025**

Return this completed page with your membership payment

Annual membership fees **are due by May 31 each year** for the club fiscal year that runs June 1 to May 31

Mail the form below and your cheque to:

Carol Barnes Phone: 519-542-6159

307 Tawny Rd E-mail: md.sleac@gmail.com

Sarnia, Ontario N7S 5K1

**To make the processing of your membership payment more efficient, please**

Make your cheque payable to SLEAC

Include your current e-mail address on the form

**Membership Renewal Information**

**Membership Year: June 1, 2024 - May 31, 2025**

(Please complete **all sections** of the form so that we can ensure our records are correct)

Renewal \_\_\_\_\_\_ New Member \_\_\_\_\_\_

*Annuitant Name:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (first name commonly used)

*Spouse / Partner Name:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (first name commonly used)

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

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Phone number:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*E-mail:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*How would you like to receive the Club newsletter?*

The club strongly suggests receiving your newsletter by email to save on mailing costs

*I would like to receive the newsletter by E-mail\_\_\_\_\_\_ or regular mail* \_\_\_\_\_\_

*Membership dues: \_\_\_\_\_\_ memberships @ $10/person = Total $ \_\_\_\_\_\_\_\_\_\_\_*

*New Members Only: Employee (PERNR) # or Benefits (BN) #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*