

Lac La Biche Heritage Society Membership Application

First Name _____ Last Name _____

Address _____

Contact Number _____ Email _____

Emergency Contact Name _____

Emergency Contact Number _____

Birthday (Day/Month/Year) _____

What age category do you fall into? 50-60___ 61-70___ 71-80___ 80+___

Do you agree to have your name appear on our Newsletter when it is your birthday month? YES NO

Do you identify as any of these minority groups? Please check all that apply. **OPTIONAL**

(This information will be used for grant applications)

Physical Disability ___ Indigenous ___ New Canadian ___ Rural (over 30km LLB or Plamondon)___

ALL MEMBERS - With respect to activities organized by the Lac La Biche Heritage Society. As a member, your photo may be taken during activities and these may be used on the Society website or social media. Names of members will not be included in any advertising or promotions unless permission is given.

I agree to have my name published if I appear in a photo taken during a LLB Heritage Society activity. YES NO

How would you like to receive the monthly Newsletter? Choose one.

Email ___ Pick-up at the Heritage Centre ___ Heritage Website ___ Heritage Facebook Page ___

Mail ___ (Please note, if you choose mail an additional \$12/year will be added to your membership fees for administration and postage costs)

Membership 1 Year (Jan 1, 2025 to Dec 31, 2025) \$10 _____

Membership 2 Year (Jan 1, 2026 to Dec 31, 2026) \$20 _____

Mailing Costs (if applicable) \$12 per year _____

Total Fees Owning _____

Payment is accepted by cash, cheque or E-transfer to heritage2016@gmail.com

Applicant Signature _____ Date _____