



First Name Last Name _____

Street/Apt/Box _____

Community _____ Prov. _____ Postal Code _____

Email _____

Landline (_____) Cell (_____)

Membership Fees: The suggested fee is \$130.00 annually. The minimum membership fee is \$15. If you are able, you are encouraged to pay \$155, which helps to offset for those paying a lower amount. Tax Receipts for Membership Fees and any other financial donations are issued after year end.

Pre-authorized withdrawal from your bank account will happen on the 20th of each month.

I give authorization for Diakonia of the United Church to make this withdrawal:

Monthly amount: _____ -- Enclose a VOIDED cheque.

Start Date: _____ OR immediately

Signature _____

Annual	Monthly
\$120	\$10
\$130	\$10.84
\$140	\$11.67
\$150	\$12.50
\$155	\$12.92

Void Cheque

Email completed form to : ducctreasurer@gmail.com

OR

Mail completed form to DUCC Treasurer, Helen Reed, Box 99, Oyen, Alberta, T0J 2J0