

Membership Application Form

~New and Renewing Members ~

Commemorative Association (use the full name)

Please complete this form annually (for the purpose of updating our Membership database) **Dues** ~ New or Renewing Member Dues - \$20 per Year (Veterans and/or Widows do NOT pay Dues)

~ Member Information - Please Print Clearly ~

Type of Membership (Circle One): New Renewing Veteran Widow Name ______ Address _____ City_____ Province _____ Postal Code _____ Telephone (Include Area Code) (___)____ Email Address _____ Use my Email address to notify me of HKVCA events and newsletters. (circle one) Yes | No (By choosing yes, I understand I will not receive a paper copy of the newsletter by mail.) ~ Relationship to Veteran~

 Veteran's Name
 _______ Regiment
 _______ Regimental Number

 Date of birth (if known)
 _______ Date of death (if known)

Relationship (Circle One) Veteran Wife/Widow Son/Daughter Brother/Sister Grandson/Granddaughter Other (Specify)_____ ~Parent Region~ Choose which Region you wish to administer your membership (you will automatically receive Regional news (when published) in addition to the National newsletter) Circle One Choice: Atlantic | Quebec | Ontario | Prairie | BC ~ Contact/Next of Kin information for Veteran/Widow only Name _______Telephone (Include Area Code) ______

Mail to: (choose appropriate address for your Parent Region from https://www.hkvca.ca/contacts.php)

Make Cheque for Membership Dues (\$20.00) or Donations Payable to: **Hong Kong Veterans**