YUKON LIBERAL PARTY

MEMBERSHIP REQUEST for NEW MEMBERS and RENEWALS

APPLICANT INFORMATION – *PLEASE PRINT*

NAME _____
First Initials Last

RESIDENCE *(business address and postal box not accepted)*

_____
Number Street City / Town / Village Territory Postal Code

MAILING ADDRESS *(if different than residential)*

_____
Postal Box or Number Street City / Town / Village Territory Postal Code

Please list phone numbers and email addresses for contact by the Yukon Liberal Party

TELEPHONE _____ (FAX**)** _____

EMAIL _____

MEMBERSHIP INFORMATION

Dues in cash or cheque must be included with the completed application. Please indicate your preference below:

_____ $10 for a yearly membership (all memberships expire December 31st)
_____ multi-year membership @ $10 per year for (_____) years
_____ $150 for a lifetime membership

Application is made in accordance with the Constitution and Bylaws of the Yukon Liberal Party. Your signature below certifies that you are: ***(1)*** *14 years of age or older,* ***(2)*** *ordinarily a resident of Yukon, and* ***(3)*** *not a member of any other territorial political party in Yukon.*

_____ _____ _____
Signature of Applicant **Date of Birth** (YYYY/MM/DD) **Date of Application**

Check if you wish to:

_____ have your membership automatically renewed each year via credit card
_____ make a monthly tax deductible donation via debit or credit card
_____ have a membership card mailed to you

Mail completed application and fees to: Yukon Liberal Party 108 Elliott Street, Suite 183 Whitehorse, YT Y1A 6C4

For further information, visit our website at www.*ylp.ca* or phone (867)667-4748

OFFICE USE ONLY Cheque (_____) Cash (_____) Debit (_____)

Name on Credit Card (_____) Card Type (_____) Number (_____) Expiry (_____)

Application received by _____

Approved by Membership Chair, Secretary, or President _____

Date of Processing (Office) _____