

2016 Membership Form

Card #	
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Name					
Address					
City/Postal Code					
Phone					
Email Address					
Membership Type (Select one)	Single	- or -	Family		
Additional Family Nam	es				
Name		Email		Phone Number (if not the same)	ERC Card Number
Please Mail To:					
ERC 6563 Gateway Blvd. Edmonton AB T6H 2J1					

Do NOT send cash through the mail!