



2012

Membership Renewal Form

AFFILIATION (please check one or more):			
Sections:	<input type="checkbox"/> Conservation Committee	<input type="checkbox"/> Teaching	<input type="checkbox"/> Ecology
	<input type="checkbox"/> Plant Development	<input type="checkbox"/> Systematics and Phytogeography	<input type="checkbox"/> Mycology

The CBA requires your <u>PERMISSION TO RELEASE</u> your name, address, telephone and e-mail information, for internal CBA business <u>ONLY</u> (e.g. section business, award announcements). No information will be released to outside parties.	
(please check one box)	<input type="checkbox"/> Allow release of my contact information <input type="checkbox"/> Do NOT release my contact information

TYPE OF MEMBERSHIP:

<input type="checkbox"/> Family Membership price for regular members:	Amount	
	\$83.00	_____
(Name of Members Involved)		
<input type="checkbox"/> Half-price for certified Member of CSPP for regular (\$27.50) or students (\$12.50)		_____
<input type="checkbox"/> Regular.....	\$55.00	_____
<input type="checkbox"/> Student / Post Doctorate.....	\$25.00	_____
<input type="checkbox"/> Retired.....	\$25.00	_____
<input type="checkbox"/> Life Member	\$1,000.00	_____
<input type="checkbox"/> Life Member 55 years of age and over	\$500.00	_____

TYPE OF BULLETIN:

<input type="checkbox"/> Paper Copy (Extra Charge for Regular & Students Only)\$8.00	_____
<input type="checkbox"/> Electronic Copy (No Charge)		
<input type="checkbox"/> Retired members (No charge for paper, indicate option): Paper Copy _____	OR	Electronic Copy _____

DONATIONS – 100% TAX DEDUCTIBLE:

<input type="checkbox"/> John Macoun Fund (Grad Student Travel Bursary)	_____
<input type="checkbox"/> Luella Weresub Fund (Mycology Section)	_____
<input type="checkbox"/> A. E. Porsild Fund (Systematics And Phytogeography Section)	_____
<input type="checkbox"/> J. S. Rowe Fund (Ecology Section).....	_____
<input type="checkbox"/> Taylor Steeves Fund (Plant Development Section)	_____
<input type="checkbox"/> Iain & Sylvia Taylor Fund (Poster Prize)	_____
<input type="checkbox"/> Keith Winterhalder Fund (Undergrad Student Travel Bursary)	_____

Charitable donation receipts for income tax purposes will be issued for donations to the John Macoun, Luella Weresub, A. E. Porsild, J. S. Rowe, Taylor Steeves, Iain & Sylvia Taylor and Keith Winterhalder Funds.

TOTAL DUE / ENCLOSED.....

CHARGE TO VISA/MASTERCARD # _____ **EXP** _____
 (Transaction will be posted through Aberdeen Agencies Ltd.) _____

Signature

RETURN WITH CHEQUE PAYABLE TO CBA/ABC TO:

Canadian Botanical Association	Tel: (306) 253-4654
CBA Memberships (Renewal)	Fax: (306) 253-4744
Box 160	Tel: (888) 993-9990
Aberdeen SK S0K 0A0	e-mail: vanda.wutzke@sasktel.net

All information on the label is correct

If necessary, make corrections below
***** Please use your professional address if possible *****

Name: _____

Employer: _____

Department: _____

Street: _____

City/ Prov: _____

Post Code: _____

E-mail: _____

Telephone: _____ Fax: _____