



**Mennonite Historical Society of BC**  
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 (604) 853-6177

LAST NAME: \_\_\_\_\_  
 MEMBERSHIP YEAR: \_\_\_\_\_  
 Email Distribution Lists: \_\_\_\_\_  
**FOR OFFICE USE ONLY**

Your Mennonite Historical Society of BC membership and/or donation demonstrates your support for the preservation of Mennonite history and heritage for future generations. Thank you for your contribution(s) to our non-profit organization.

**MHSBC Annual Membership Form**

Membership includes *Roots and Branches* magazines, a vote at MHSBC general meetings & information on upcoming events via our email list. **Due to CRA regulations, memberships are not tax receipt-able.**

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

- I agree to have emails sent to me by the Mennonite Historical Society of BC.
- I wish to purchase a membership of \$35 for this year.
- I wish to purchase a membership of \$70 for this year and next year.
- Cheque     Visa     Master Card \_\_\_\_\_ Expiry \_\_\_\_\_  
 (MM/YY)
- Debit Card     Paypal

Signature \_\_\_\_\_ Date \_\_\_\_\_

**MHSBC Donation Form A tax deductible receipt will be issued for donations.**

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Phone \_\_\_\_\_

Email address \_\_\_\_\_

I wish to make a donation of

- \$50     \$100     \$200     Other \$ \_\_\_\_\_
- Cheque     Visa     Master Card \_\_\_\_\_ Expiry \_\_\_\_\_  
 (MM/YY)
- Debit Card     Paypal

- I agree to have emails sent to me by the Mennonite Historical Society of BC.

Signature \_\_\_\_\_ Date \_\_\_\_\_



**Give the Gift of Membership!**  
 Purchase Memberships for  
 friends & relatives today!



LEAF

GIVING ENVELOPE # \_\_\_\_\_