Canadian Membership Form

Name: ___________________________________________________________________________________

Address: ________________________________________________________________________________

City: ____________________________________________________________________________________

Province: ________________________________________________________________________________

Postal Code: _____________________________________________________________________________

Country: ________________________________________________________________________________

Primary Phone: ____________________________ Secondary Phone: _____________________________

Email Address: ____________________________________________________________

(Email addresses are collected for JASNA use only. We do not sell, rent, or give them to third parties.)

**TYPE OF MEMBERSHIP:**

☐ Individual Annual ($38)    ☐ Student Annual (Full-Time) ($23)    ☐ Sustaining Annual ($75)

☐ Individual Life ($650)     ☐ Family Life ($850)*    ☐ Convert Individual Life to Family Life ($200)

*If choosing Family Life Membership, name of second member is required: ______________________________

**PLEASE CHECK ALL THAT APPLY:**

☐ New member    ☐ Renewal    ☐ Change Email/Phone/Address    ☐ Donation

☐ This is a gift. Please indicate that the gift is from: _______________________________________

**An Annual Membership starts on the date the membership is processed and expires one year later.** For example, a membership that starts on June 1 will be active through May 31 of the following year. When a membership is renewed before it expires, the new membership term will start after the current membership year is completed. **Memberships paid by cheque take 4 to 6 weeks to process after JASNA receives the completed application form and dues.**

**I ALSO WISH TO DONATE TO:**

For Canadian tax purposes, contributions are deductible only if designated for JASNA Canada; a tax receipt will be issued for those donations.

☐ JASNA Canada $ __________

☐ Jane Austen’s House Museum, Chawton, England** $ __________

☐ Austen-related Churches in England $ __________

Total Dues and Donation Amount: $ __________

**If you are donating to Jane Austen’s House Museum, may we share your contact information with them so that they can acknowledge your gift as well? (Not required.) Yes ____ No ____

Mail this form and your cheque, made payable to JASNA Canada in Canadian dollars, to the Canadian Membership Secretary:

Phyllis Ferguson, 698 Wellington Place, North Vancouver, BC  V7K 3A1  Canada  •  Email: pmfb.jasna@gmail.com