



Canadian Jamaican Medical Assistance Society

151 – 10090 – 152nd Street, Suite 271, Surrey B.C., Canada V3R 8X8

Phone: 604-582-0274; Fax: 604-582-0593; Email: info@cjmas.ca; Website: www.cjmas.ca

MEMBERSHIP APPLICATION

TO: The Directors
Canadian Jamaican Medical Assistance Society
151 - 10090 - 151 Street Suite #271, Surrey, B.C. V3R 8X8

Dear Sirs,

Pursuant to Bylaw 4 of The Canadian Jamaican Medical Assistance Society,
I hereby apply for membership in the society.

NAME: _____

HOME ADDRESS: _____

CITY: _____ PROVINCE _____

POSTAL CODE: _____

PHONE: _____

EMAIL _____

MEMBERSHIP FEE: \$ 20.00 per person

Number of People _____ Donation: \$ _____ Optional

TOTAL : \$ _____

Mail To Or Call:

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