

# Canadian Society of Homeopaths (Pending)

Affiliated with West Coast Homeopathic Society

## 2006 Supporting Membership Application Form

### 1. CONTACT INFORMATION

NAME		
ADDRESS		
CITY/DISTRICT	PROVINCE / STATE	POSTAL / ZIP CODE
PHONE(S)	FAX	E-MAIL

***I want to assist with:***

- Community Building
- Fundraising
- Media Response
- Membership
- Newsletter
- Political Action
- Public Education
- Other:

### 2. MEMBERSHIP FEES

A. Friend of Homeopathy: Annual Dues: \$ 35.00

Payment Due \$ \_\_\_\_\_

B. Student of Recognized Educational Institution: Annual Dues: \$ 35.00

CURRENT SCHOOL & SCHOOL YEAR:

\_\_\_\_\_

Payment Due \$ \_\_\_\_\_

### 3. MEMBERSHIP DISCOUNTS

- *What is Homeopathy?* brochure: \_\_\_\_\_ copies @ \$ .10 each = \$ \_\_\_\_\_
- *Homeopathy Awareness* bookmark \_\_\_\_\_ copies @ \$ .05 each = \$ \_\_\_\_\_
- Public Education Manual \_\_\_\_\_ copies @ \$10.00 each = \$ \_\_\_\_\_

PLUS Handling & Postage = \$ 4.25

**TOTAL Literature Costs . . . \$ \_\_\_\_\_**

4. DONATIONS: I wish to further support the \_\_\_\_\_ Operating Fund / \_\_\_\_\_ Legal Fund \$ \_\_\_\_\_

**TOTAL Payment Enclosed: \$ \_\_\_\_\_**

Make Cheque out to **West Coast Homeopathic Society** and Reference "CSH"  
Mail Application and Cheque to **#101 - 1001 West Broadway, Unit 120**  
**Vancouver, BC V6H 4E4**