



Membership Form

Membership Category (Please check one)

- Member \$75
- Salish Sea Advocate \$250
- Salish Sea Ambassador \$500
- Salish Sea League \$750
- Ocean Guardian \$1,500 and above

Member Information

Please print name as you want it to appear on the membership card.

First Name _____ Initial _____
Last Name _____
Address _____
City _____ Prov/State _____
Postal/Zip _____
Day Phone _____
Email Address _____

Second Named Person

First Name _____ Initial _____
Last Name _____

Do you have children or grandchildren between 3 and 17 years of age that you would like to include on your membership? If so, please list their first and last names and birth dates.

First Name _____
Last Name _____
Birth Date _____

First Name _____
Last Name _____
Birth Date _____

First Name _____
Last Name _____
Birth Date _____

Consider giving a membership to the Shaw Ocean Discovery Centre next birthday or holiday!

If this membership is a gift, please fill in the recipient's Member Information above and add your name and address below.

Name _____
Address _____
City _____ Prov/State _____
Postal/Zip _____

Method of Payment

Total Amount \$ _____

- Enclosed is my cheque payable to the Shaw Ocean Discovery Centre
- Please charge my:
 VISA MasterCard American Express

Account Number _____
Expiry Date _____ / _____
Signature _____

All membership levels are tax deductible. Receipts will be issued to the fullest extent allowed by Canada Revenue Agency.

Please return this form to:

Membership Department
Shaw Ocean Discovery Centre
9811 Seaport Place,
Sidney, BC V8L 4X3
Phone: 250.665.7511
Fax: 778.426.0715

Thank you!

We're really happy you've come aboard.
Contact us anytime with questions, concerns or ideas.