



Saskatchewan
Archaeological
Society

MEMBERSHIP FORM

All memberships are in effect from January 1st to December 31st each year.
Receipts for donations made before December 31st will be sent to you in
February for your tax return.

MEMBERSHIP

Renewal New Member Gift Membership

Name: _____
Address: _____

Postal Code: _____
Telephone: Home () _____ Work () _____
Email: _____

I agree to abide by the goals of the SAS and hereby apply for membership.
Payment is enclosed.

I consent to the SAS contacting me via email according to Canadian Anti-Spam
Legislation (CASL).

Check Membership Choice:

<input type="checkbox"/> Individual	\$30.00	<input type="checkbox"/> Institutional	\$40.00
<input type="checkbox"/> Family	\$40.00	<input type="checkbox"/> School	\$40.00
<input type="checkbox"/> Senior	\$25.00	<input type="checkbox"/> Student	\$25.00
<input type="checkbox"/> Life	\$400.00	<input type="checkbox"/> Couple Life	\$500.00

DONATIONS

I wish to make a total donation of \$ _____ to the following:

General Society Programs (to be used for our many public education programs and activities, wherever needed). Amount: \$ _____

Research Programs (to be used for specific research programs and projects). Amount: \$ _____

Zenon Pohorecky Memorial Bursary (to build an endowment for an annual bursary for university students, in Dr. Pohorecky's name). Amount: \$ _____

Keith Lewis Memorial Student Presentation Award Amount: \$ _____

You will be sent an income tax receipt for any donation above and beyond your regular membership fee.

PAYMENT METHOD: Cheque or Money Order (make payable to **SAS** and enclosed.)
 MasterCard Visa Automatic Renewal Option (*credit card # will be held on file)

Credit Card #: _____
Name on Card: _____ Expiry Date: _____
Postal Code (associated with credit card): _____

To submit this form:
Mail: #1-1730 Quebec Avenue, Saskatoon, SK S7K 1V9
Fax: (306) 665-1928 with your credit card information.
Phone: (306) 664-4124 with your credit card number.
Email: general@thesas.ca

