

The Seaforth Highlanders of Canada REGIMENTAL ASSOCIATION

1650 BURRARD STREET
VANCOUVER, B.C.
V6J 3G4

TEL: 604-733-3836

DATE _____

APPLICATION FOR MEMBERSHIP

NAME (Please Print) _____

(Last Name)

(First Names)

ADDRESS _____

CITY/TOWN _____ POSTAL CODE _____

TEL # _____ E-MAIL _____

REFERRED BY _____

DETAILS OF SERVICE:

| <u>From</u> | <u>to</u> | <u>Unit (Cadets, Militia, Etc...)</u> |
|-------------|-----------|---------------------------------------|
| _____ 19 | _____ 19 | _____ |
| _____ 19 | _____ 19 | _____ |
| _____ 19 | _____ 19 | _____ |
| _____ 19 | _____ 19 | _____ |

REGIMENTAL NUMBER (S) _____

RANK (present/on discharge) _____

Make cheque/money order payable to: **SEAFORTH ASSOCIATION.**

Note: The current annual dues are **\$20.00** (Enclosed)

(Signed) _____

Return to: MEMBERSHIP CHAIRMAN
SEAFORTH ASSOCIATION (above address)

FAMILY MILITARY CONNECTIONS _____
