

ESCE MEMBERSHIP

Yes, I/we would like to keep my/our membership active in The Edmonton Society for Christian Education. I/we have previously signed the Statement of Faith.

Name: _____ Phone: _____

Address: _____ City/Prov: _____ Postal Code: _____

\$25 (membership fee for a single person)

\$50 (membership fee for a family)

\$ _____ (additional donation)

\$ _____ Total Amount Enclosed

Payment Arrangements:

Chq (payable to The Edmonton Society for Christian Education)

Visa **MC**

Card Number: _____ Exp _____

Signature _____

***Membership fees are 100% tax deductible*

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