



Membership Application Form

Progressive Conservative Association of Prince Edward Island

Address: PO Box 578, Charlottetown, Prince Edward Island C1A 7L1 | Website: www.pccparty.pe.ca

E-mail: info@pccparty.pe.ca | Telephone: 902-628-8679 | Toll Free: 1-800-859-4221 | Fax: 902-628-6428

New Member

Renewal

Form will not be accepted unless ALL information is completed accurately and in full. Please return to address above.

Membership Terms: 2 Years Individual \$10.00 Senior \$5.00 (65+) Youth (14-19) \$5.00 Family \$25.00

Mr. Ms.

5 Years Individual \$20.00 Senior \$10.00 (65+) Youth \$10.00

Date of Birth MM DD YY

Mrs. Miss.

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____ Fax: _____

E-mail: _____ Signature of Applicant X _____

I would like to receive the PC Newsletter by: Email or Mail Date of Application/Renewal _____

I would like to become a Volunteer:

District Level Provincial Office

For Office Use Only

District #: _____ Poll #: _____ Membership #: _____

Family Membership Only

Spouse _____ Date of Birth MM DD YY

Youth _____ Date of Birth MM DD YY

Youth _____ Date of Birth MM DD YY

Youth _____ Date of Birth MM DD YY

Payment Information

I would like to donate \$ _____

TOTAL DUE: _____ Cash Cheque

MASTERCARD EXPIRY DATE AMOUNT AUTHORIZED

VISA VISA _____

CARD NUMBER _____

SIGNATURE _____