## **UCW LIFE MEMBERSHIP**

## APPLICATION FORM

Date:			
Please sendLife	Membership(s) for:	(Please print)	
1.			
Church			
Address			
Enclosed is our cheque for	\$payable	to: The United Church of Canada	
Send package to:			
		(Postal Code)	
Your tel.:	Date of Pre	sentation:	_
Please return this form to	The United Church in M	St. West, Suite 200	
Questions? Contac	Toll-free: 1	1-7680 ext. 4137 -800-268-3781 ext. 4137 v@united-church.ca	

Lost or damaged certificate: \$5.00

There is no charge for a broken pin if the old one is sent in.

Lost pin: \$15.00

Pin and Certificate: \$60.00 Deceased Member's Transfer: \$40.00