



DIONNE QUINTS HERITAGE BOARD INC.
Membership Application Form

Office Use Only

Membership Year: _____
Yearly Membership Dues \$20.00
Paid by: Cash Cheque
(circle one)

Name: _____

Address: _____
Street

City Province/State PO/Zip Code

Email: _____

Cell #: _____

Home #: _____

Date: _____

Signature: _____

Do you wish to be contacted by email for upcoming events and news?

Yes No

May we contact you regarding future volunteer opportunities?

Yes No