



MEMBERSHIP
One-year membership 2010

New member
Returning member

Individual
Family

Name: _____

Address: _____

Telephone: _____ Alternate phone: _____

e-mail: _____ sign me up for the electronic newsletter

I'd like to talk with someone about volunteer opportunities. Please contact me.

Annual membership fee \$20 (individual) \$30 (family) is enclosed

please mail form and cheque to:
Ottawa StoryTellers
5 Beechwood Ave.,
P.O.Box 74015
Ottawa, ON, K1M 1M0

THANK YOU!

This information will be used only in relation to your OST membership and will not be shared or sold.

If you do not want to be on our distribution list to hear about up-coming events, please check here: