ASSOCIATION OF REPRESENTATIONAL ARTISTS
WINDSOR AND ESSEX COUNTY

INVOICE

ANNUAL RENEWAL DUES

MEMBER NAME : _____
LAST FIRST

ADDRESS: _____
STREET APT #

_____
CITY POSTAL CODE

PHONE # _____

E-MAIL: _____

MEMBERSHIP FEES – (January 01 – December 31) 20____
YEAR

NEW MEMBER: _____ **RENEWING MEMBER:** _____

SINGLE:	**FAMILY**	**(FAMILY MEMBER NAMES)**
$45.00 / YEAR	**$60.00 / YEAR**	
☐	☐	☐ _____

PLEASE COMPLETE INFORMATION AND FORWARD WITH A CHEQUE TO:

Ann Stefani, Membership Chairperson
1030 Erie Rd., S., R.R.# 3,
Harrow, ON N0R-1G0

OR HAND COMPLETED FORM, AND PAYMENT (CHEQUE OR CASH) TO SAME PRIOR TO MEETING OR DURING BREAK. THANK YOU