

MEMBERSHIP FORM

ASSOCIATION OF LOUIS TÉTREAU'S DESCENDANTS

Annual dues : \$ 25

Renewal ☐ New membership ☐ Address change ☐ Donation ☐

Name : _____ First Name : _____ Membership No : _____

Address : _____

City : _____ Province/state : _____

Country : _____ Postal/zip code : _____

Phone : _____ E-mail address : _____

☐ I give permission to the Louis Tétreau's Descendants Association to share the above personal information with other members of the said Association.

☐ For the year to come and for a \$ 40 fee, I would like my business card to appear in the « Les Tétreau disent... » newsletter and also on the website of the Association with a link either to my personal or business website.

All correspondence should be : in French ☐ in English ☐

Enclosed is my check or money order to the amount of : _____

Date : _____ Signature : _____

Please send your check or money order, care of the **Louis Tétreau's Descendants Association**, to the following postal address :

André Dumont, 1974 Rue Émile-Nelligan, Varennes (Québec) CANADA J3X 1X1

Tél. : 450 652-5097 E-mail : andre.dumont.789@hotmail.com