

T.C.P.O.A. MEMBER INFORMATION 2012

DUES FOR 2012.....\$100.00

Please complete the member information requested below with your current personal data and make a check or money order in US\$ or B\$ payable to T.C.P.O.A.

Last Name _____ First Name(s) _____

Street /P.O.Box _____ City _____

State/Province _____ Zip Code _____ Country _____

Hm Ph _____ Alternative Ph _____

TC P. O. Box AB _____ TC Address _____

TC Ph _____ Alternative TC Ph _____

Is your TC ph also a fax line? YES _____ NO _____. If no, fax line number _____

Email 1 _____ Email 2 _____

I authorize publication of this information in the next Community Directory YES _____ NO _____

Signature _____ Date _____

