



Native Mental Health Association of Canada
Support the Association with a Membership or Renewal

PURPOSE:

- Yearly gathering for mental health care providers
- National forum to develop insight into and effective responses to mental health care
- Advocate for improved mental health programs, services and resources
- Provide an information service on Native mental health issues
- Provide an inventory of transcripts from previous year's meetings
- Maintain records and memberships

MEMBERSHIP ENTITLES YOU TO:

- Reduction in registration fees for the conference
- Voting privileges (Re: Board of Directors)
- Ability to sit on the Board of Directors

The mailing list is updated annually and being a member in good standing ensures that you will receive all information regarding the Native Mental Health Association of Canada.

Membership #: _____ Renewal _____ New Member _____

Name: _____

Address: _____ City/Prov: _____

Postal Code: _____ Phone: (res) _____ (bus) _____

Fax: _____ E-mail: _____

MEMBERSHIP CATEGORIES:		METHOD OF PAYMENT:	
<input type="checkbox"/> \$15.00 Individual		<input type="checkbox"/> Cheque	
<input type="checkbox"/> \$30.00 Agency/Association		<input type="checkbox"/> Money Order	
<input type="checkbox"/> \$_____ Donation			
<input type="checkbox"/> \$_____ Total Enclosed			
Donations allow us to provide extra services and provide a greater amount of information to our members. All donations are tax deductible.			

For Office Use Only:
Date Received: _____ Card & Receipt Issued: _____ Payment: _____

PO Box 242, Chilliwack, BC V2P 6J1
P: 604.793.1983 F: 604.793.4557 E: nmha@telus.net