



## LACAA 2019-2020 Membership

Name: \_\_\_\_\_

Facility Name: \_\_\_\_\_

Name of Foundation: \_\_\_\_\_

Coordinator Email: \_\_\_\_\_

Foundation  
Email: \_\_\_\_\_

Office Phone # \_\_\_\_\_ Cell #: \_\_\_\_\_

Lodge Fax # \_\_\_\_\_

Mailing Address  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

New Member \_\_\_\_\_ Returning Member \_\_\_\_\_

Membership Fee \_\_\_\_\_ X \$ 50.00  
= \_\_\_\_\_ TOTAL = \_\_\_\_\_

**All Checks/Money Orders Payable to:**  
*Lodge Activity Coordinators Association of Alberta*

**Please mail this form and payment to:**

Pernille Nielsen  
5427-52 Ave.  
Rocky Mountain House  
AB, T4T 1S9

You can also scan and email your form and direct any questions to: [lacaa89@outlook.com](mailto:lacaa89@outlook.com)

**PLEASE NOTE:**

- ❖ Receipts will be issued upon receipt of payment
- ❖ Membership covers April 2019-March 2020 and costs are non-refundable

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**\*\*For Office Use Only\*\***

Membership Fee     Membership Receipt

**Paid By**

Check # \_\_\_\_\_ OR  Money Order# \_\_\_\_\_

Added to Mailing List

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