



HPCL MEMBERSHIP REGISTRATION FORM

Please fill out the form and mail with your cheque to: **Heritage Point Community League, P.O. Box 22510, SouthBrook Post Office, Edmonton, AB T6W 0C3**

Name: Adult #1 _____ Adult #2 _____

Address _____ Postal Code _____

Cell phone _____ Home tel. _____ Bus. tel. _____

Email _____

Child's name	Year of birth	M/F
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Membership type:

Family Single Senior Other

Associate (include home league name/# _____)

Would you like to receive HPCL's newsletter by email? Yes____ No____

Are you interested in volunteering? Yes____ No____

Membership Fee: \$30.00 Cheque # _____

of Skate Tags required _____

Date _____