



# WINKLER HERITAGE SOCIETY

## Application for Membership

Name \_\_\_\_\_  
Last First

Street Address or Box Number \_\_\_\_\_

Town or City \_\_\_\_\_ Province \_\_\_\_\_

Postal Code \_\_\_\_\_

Phone Number ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_ Email address \_\_\_\_\_

I am enclosing \$ \_\_\_\_\_ as a membership fee.

I am enclosing \$ \_\_\_\_\_ as a donation.

Send completed application to:

Winkler Heritage Society 185 Main Street Winkler, MB R6W 1B4