LONDON CLUB OF THE DEAF, INC, Membership Form Year Registration – 2025	60 HANNIVERSARY
New 🗌 Renewal 🗌 Change 🗌	
First and Last name:	FullSeniorAssociateAdult (18-54)(55 and up)(Hearing all ages)(for demographic purposes)
Partner's/Spouse's name:	Full 🗌 Senior 🗌 Associate 🗌
Address: Ap	ot./Unit:
City: Province: Postal Code	:
Email:	
Partner's/Spouse's email:	
Membership runs from November 1, 2024 to October 31, 2025 \$10.00 per Member (age 18 and up) Choice of payment: Cash \$ Choice of payment: Cheque: payable to LONDON CLUB OF THE DEAF Donation amount:	
Office Use Only: Date of issuance and verification hereinafter signed upon the receipt of payment received on	