

CARD REPLACEMENT FORM-PLEASE PRINT CLEARLY

VANCOUVER MÉTIS COMMUNITY ASSOCIATION

www.vancouvermetis.com

#310-744 West Hastings Street
Vancouver BC
V6C 1A5

tel: (604) 682-2933

Due to my VMCA card being (check one):

Stolen

Lost/Misplaced

Destroyed

I am requesting a replacement.

I verify that I am no longer in possession of my VMCA membership card. In the event that my previous card does surface I will, at my own expense, return it to the VMCA office.

First Name _____ Last Name _____ Initial _____

Address _____ City _____ Province _____

Postal Code _____ Phone Number _____ Email _____

Birth Date: Day _____ Month _____ Year _____

Height _____ Weight _____ Eye Colour _____

Gender:

Male

Female

Payment (please circle): Cheque Money Order Cash

Date _____ Signature _____ Witness _____

FILL OUT THIS ENTIRE FORM. THERE IS A \$10.00 FEE FOR THE REPLACEMENT CARD.