

Please print, fill in and mail this form with your payment.

I WANT TO BECOME A FRIEND OF THE MUSEUM:

- New member
- Renewal
- Gift membership

TO COMPLETE:

Last Name: _____ First name: _____
 Address: _____
 City: _____ Province: _____
 Postal code: _____ Country: _____
 Telephone : Residence: () _____ Work: () _____
 Fax: () _____
 Email: _____

For FAMILY memberships only:

Partner: _____
 Children: 1. _____
 2. _____
 3. _____

Enclose is a cheque mode out to La Maison Saint-Gabriel :

CATEGORIES	RATES			
	1 year	✓	2 years	✓
Adults	45 \$		60 \$	
Student *	15 \$		25 \$	
Senior **	30 \$		45 \$	
Family ***	75 \$		95 \$	
Residant of Pointe-St-Charles	15 \$		20 \$	

AMOUNT: _____ \$
DONATION: _____ \$
TOTAL : _____ \$

A tax receipt will be issued for any donation exceeding the amount of the membership fee.

* Children (6 and older) and full time students with school ID
 ** 60 years and older with a proof of age
 *** Including two adults and up to three children (under 17 years old)