



**Membership Registration Form**  
**September 1, 2019 – August 31, 2020**  
 Email: [info@acsd.ca](mailto:info@acsd.ca)

**MEMBERSHIP APPLICATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Anti-Spam Law:**  
 Do you want to subscribe to ACSD Newsletter and any other information about Deaf events through email? Yes  No

<input type="checkbox"/>	Adult / Seniors (55+)	\$15.00	X		= \$
<input type="checkbox"/>	Associate / Family / Student	\$15.00	X		= \$
Total					\$

**Conditions of Membership**

- The **active** members (Deaf members and Hard of Hearing) shall have the following rights and privileges:
  - The right to vote
  - The right to receive the official membership publication of the Society
  - The right to nominate candidates for elective positions.
  - The right to serve on committee of the Society
  - The right to hold elective office in the Society.
- The **associated** members (Hearing) shall have no voting rights but shall have the following rights and privileges:
  - The right to receive the official membership publication of the Society
  - The right to voice in any discussions.
  - The privilege to serve on any committee of the Society.
- The **affiliated/liaison** associations shall have to following rights and privileges:
  - The right of the representative to vote.
  - The right to receive the official membership publication of the Society.
  - The right of the representative to serve on committee
  - The right of the representative to hold selective office in the Society providing he/she is Deaf or hard of Hearing

Please make a cheque or money order payable  
 to **Alberta Cultural Society of the Deaf** and mail or drop-off to:  
 Alberta Cultural Society of the Deaf, #206, 11404-142 Street, Edmonton, Alberta T5M 1V1

**Visa, MasterCard, Debit, Cheque and E-Transfer to [acsdooffice@shawcable.com](mailto:acsdooffice@shawcable.com) are available.**  
**There is a \$2.50 charge per Visa/MasterCard Transaction and \$0.25 charge for Debit.**  
**There is \$48.00 fees for all NSF cheques.**

Payment Option (please circle): Visa    MasterCard

Name on Card \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiry Date: \_\_\_\_ / \_\_\_\_ CSV: \_\_\_\_\_

Signature of Authorization: \_\_\_\_\_