

Aquarium Club of Edmonton

Application for Subscription Membership

☐

New Member

☐

Renewal

Date: _____

Name: _____

Address: _____

Postal Code: _____

Telephone: _____

Fax: _____

Email: _____

Type of fish/aquaria kept: _____

Number of aquariums: _____ Total number of gallons: _____

Do you have a fish room?: _____ Years in the hobby: _____

Are you involved in breeding any fish species? If so, please specify:

Are there any special knowledge/experience/services you could offer the club and its members?

What other activities/subject would you like the club to get involved in?

Are there any questions that you would like addressed at our meetings or in the newsletter?

Subscription (\$25.00) **must** accompany this form.

Make cheques payable to: Aquarium Club of Edmonton

Return payment to: Aquarium Club of Edmonton
Membership Coordinator
WEM Postal Office
P.O. Box 63005
Edmonton, AB
T5T 5X1