



# Membership Form

## STEP 1 Print and fill out this form.

All items with \* must be filled in. Please print clearly.

<b>First Name *</b>	<b>Last Name *</b>
<b>Email *</b>	<b>Phone (Primary #) *</b>
<b>Street Address *</b>	
<b>Town/City *</b>	
<b>Province *</b>	<b>Postal Code *</b>

## STEP 2 Return form and payment to Legacy Land Trust Society.

### Payment Options

- By e-transfer to: [patti@legacylandtrustsociety.ca](mailto:patti@legacylandtrustsociety.ca)
- By credit card: Call our office (403) 556-1029
- By cheque: Make payable to Legacy Land Trust Society and indicate that it is for "Membership". Deliver to: 4805 – 49th Ave., Olds, AB T4H 1E1.

Once we receive your application and membership fee we'll send you a confirmation email. If you have any questions, please [contact us](#).

Thank you for becoming part of our conservation community!