

HCEA Canada Membership Application Form

Name: (First)\_\_\_\_\_ (Last)\_\_\_\_\_

Company Name: (if Applicable)\_\_\_\_\_

Mailing Address:\_\_\_\_\_ (include fire # and Conc or Line #)

City / Town:\_\_\_\_\_ Postal Code:\_\_\_\_\_

Email Address:\_\_\_\_\_

Check 1 only: \_\_\_ Individual Membership \$30.00  
\_\_\_ Individual Overseas Membership \$35.00 CDN.  
\_\_\_ Family Membership \$35.00 CDN. (includes spouse and children up to age 18 years)

Spouse's Name:\_\_\_\_\_ Children's Names:\_\_\_\_\_

Make cheques payable to **H.C.E.A. Canada**

Mail to: **H.C.E.A. Canada,**  
**1392 Brant Rd.#54,**  
**RR2 Caledonia,**  
**Ontario, Canada**  
**N3W 2G9**

*There are 4 major Committees that work to keep HCEA Canada running. We need volunteers to operate each of these committees. The names of the committees are: **Archive, Equipment & Safety, Promotion & Advertising, and Special Events** Committees.*

*Would you like to help on a committee? **YES / NO** (Circle one)*

*On which Committee would you like to be involved?\_\_\_\_\_*

*What are your interests? Tell us about them.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Do you have any machinery? We would love to hear about your collections.*

\_\_\_\_\_  
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