# Literacy Partners of Manitoba
# Business and Government Membership Form
(includes four voting members)

**Organization:** _____ **Date:** _____

**Primary** Mailing Address (for mailing newsletter and resources)**:** _____

**City:** _____ **Prov:** _____ **Postal Code:** _____

**Telephones (Please include Area Code and Extension)**

**Work Phone:** _____ **Work Fax:** _____

**Member 1)** **First Name:** _____ **Last Name:** _____

**Home Phone:** _____ **Email:** _____

**Member 2)** **First Name:** _____ **Last Name:** _____

**Home Phone:** _____ **Email:** _____

**Member 3)** **First Name:** _____ **Last Name:** _____

**Home Phone:** _____ **Email:** _____

**Member 4)** **First Name:** _____ **Last Name:** _____

**Home Phone:** _____ **Email:** _____

| Fee Schedule | | |
|---|---|---|
| ❑ | $275.00 | Annual Fee (includes 4 memberships) |
| ❑ | $70.00 | Additional Member |

**Please make** cheque payable to Literacy Partners of Manitoba.

Or pay by credit card:

❑ Visa ❑ Mastercard

Credit Card #

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Expiry Date _____/_____
Month Year

Our membership year runs from September 1 to August 31.
Pro-rated fees apply only to first-time memberships who join during the year.

| | | |
|---|---|---|
| ❑ | $225 | January 1 to March 31 |
| ❑ | $200 | April 1 to August 31 |

Questions? Call Literacy Partners of Manitoba at (204) 947-5757 or Toll free 1-866-947-5757. Email: literacy@mts.net