

The Ladies Auxiliary of the Army, Navy, Air Force Veteran's in Canada

Auxilary No. _

Anavets Assiniboia Unit #283 3584 Portage Ave, Winnipeg, MB R3K 0Z8 PH (204) 837-6708 Fax (204) 888-6358

President _____

Rec Secretary

Treasurer

Date _

To the Ladies Auxiliary of the Army, Navy, Air Force Veteran's in Canada:

I hereby make application for membership in your Auxiliary as an active member and agree, if accepted, to abide by the Constitution, Rules and By-Laws.

		PLI	EASE PRINT		
(Name in full, Miss or Mrs)		Phone #		Phone #	
Address		City		Province	-
Postal Code	_ Email Address _				
(if applicable) Service #_			-		
		Applicant's Signature			
Proposed by _		Seconded by			
		Chairman of I	Nembership Comr	nittee	
Membership Qualificatio	constitution, by-la		of this association.	Volunteers age 18 a	rdance with the aims and objects, and over.
		To be fill	ed in by Secretar	У	
	Date receiv	ved	Receipt issu	ed	
	Enter	ed on roll	Pin		