

Application Form  
General Member or Student Member Status



**General Information**

Last Name:	First Name(s)
Organization:	
Address including Postal Code:	Work Phone:
	Fax:
Email Address:	

**Full Time Education**

If you are applying for a Student Membership in AFMS, please provide details of your full time course of study.

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**Fees Due**

Annual fee, General Membership        \$130            \$\_\_\_\_\_        OR;

Annual fee, Student Membership        \$50            \$\_\_\_\_\_

Total Enclosed    \$\_\_\_\_\_

Please make cheque payable to Alberta *family* Mediation Society; OR

Visa/MC # \_\_\_\_\_ Expiry \_\_\_\_\_

Billing Address: (if different from above) \_\_\_\_\_

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