



(Effective until January 1, 2019 )

I would like to renew my membership for 2018\_\_ Date.....

Name: (please print) ..... Phone.....

Street Address..... Postal Code.....

Mailing Address (if different).....

Email address.....

All donations are appreciated and may be sent to: Salt Spring Seniors Services Society  
379 Lower Ganges Road  
Salt Spring Island BC V8K 2V4

Thank you



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Thank you