



First Name _____ Last Name _____

Address _____ City _____ Postal Code _____

Telephone H _____ W _____ Email _____

Membership Type: Regular Member Youth Member
*Members 18 years old or younger are considered
"Youth Members."*

Membership Fee \$10 Donation \$ _____ Total \$ _____

We accept Cash or Cheque.

A receipt will be issued for any payment made by a cheque or cash.

For Credit Card payment visit ICC Website www.iccongress.ca

Use Paypal to make your on-line payment.

**I have read the Bylaws of the I.C.C. and I hereby agree in principle
to abide by these Bylaws.**

Signature _____ Date _____

Please indicate areas of activity you would like to cooperate with ICC.

