



Membership Application

New Member Renewal

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Cell Phone: _____

E-mail Address: _____

I would like to help with:

Types of Birds Kept:

(a) As Pets:

(b) As Breeders:

Feathered Family Members' Names:

Please accept this as my application for membership in the BCEBS. I (we) will abide by all rules and regulations as set down in the Society's constitution and bylaws.

SIGNED: _____

Dated: _____

Make cheques payable to: B.C. Exotic Bird Society
Send this form and dues to:

B.C. Exotic Bird Society
c/o Memberships
10158 Nordel Court
Delta, BC V4G-1J8