

Have questions? Contact [info@crimewriterscanada.com](mailto:info@crimewriterscanada.com)

## ASSOCIATE MEMBERSHIP FORM

*All memberships are for 1 January to 31 December*

### Contact Information:

*(Renewing members only need to fill in name and email unless there is a change in contact information)*

<b>Name (legal)</b>		
<b>Preferred Pronoun</b>	(e.g.: he/him; she/her; they/them)	
<b>Address (street)</b>		
<b>City, Province</b>		
<b>Postal Code</b> <i>(+country if not Canada)</i>		
<b>Email</b>		
<b>Phone number(s)</b>		
<b>I am a...</b>	<input type="checkbox"/> writer	<input type="checkbox"/> editor
	<input type="checkbox"/> publisher	<input type="checkbox"/> librarian
	<input type="checkbox"/> book seller	<input type="checkbox"/> other

Members are listed by region on the Member Contacts page in the Members Only Section. This is primarily a resource for members organizing regional events. Please indicate below whether you give your permission to also list your contact information.

<input type="checkbox"/>	Yes. Please link the email address on this form.
<input type="checkbox"/>	Yes. Please use the following link:
<input type="checkbox"/>	No. I do not want a contact link.

DONATION for program development: In addition to my membership dues I want to donate \$ \_\_\_\_\_

**I am enclosing in total with this form: \$ \_\_\_\_\_**

(Consult website for current fees or email [info@crimewriterscanada.com](mailto:info@crimewriterscanada.com) )

**Please make your cheque payable to Crime Writers of Canada.**

**Send cheque in Canadian funds and form to:**

**Crime Writers of Canada  
4C-240 Westwood Road, Guelph, ON N1H 7W9**