



Membership Form

Please complete the details below:

Name: _____

Address: _____

Phone #: _____

Email Address: _____

Membership fee \$20.00

Additional donations can be submitted along with your membership and payment to:

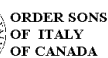
**10 Holland Drive
Bolton, ON L7E 1G6**

Thank you!

10 Holland Drive • Bolton, ON • L7E 1G6 • tel/fax: (416) 242-THAL (8425)

email: info@thalassemia.ca • website: www.thalassemia.ca

Registered Charitable # 119068492 RR 0001



Head Office: 330 – 3300 Highway No 7. Vaughan, Ontario L4K 4M3
