



Canadian Mental Health  
Association  
Saskatchewan  
*Mental health for all*

# MEMBERSHIP FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Date: \_\_\_\_\_

## MEMBERSHIP TYPE

New     Renewal

Expiry Date: March 31, 2024

- Participant    \$ 2.00
- Personal        15.00
- Supporting      30.00
- Professional    50.00
- Patron            150.00

I would also like to make a donation of amount: \$ \_\_\_\_\_ (tax receipt issued for all donations over \$10.00)

Total amount: \$ \_\_\_\_\_

Please make cheques payable to **CMHA Saskatchewan Division Inc.**

To become a CMHA member, simply fill out the form and send it, along with your payment, to the CMHA Division office, or contact your local branch.

By joining CMHA you will help support social, vocational and recreational programs designed to help those people affected by mental illness to lead productive lives. Your membership fees will also be used to help provide education and create mental health awareness throughout Saskatchewan.

\_\_\_ I would like to receive the CMHASK Community Newsletter (email subscription)

\_\_\_ I do not wish to receive the CMHASK Community Newsletter (email subscription)

\_\_\_ I would like to be notified via email when the latest edition of Transition Magazine is available

\_\_\_ I do not wish to be notified via email when the latest edition of Transition Magazine is available

Charitable Organization # 10686 4044 RR0001

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