



# MaterCare International (Canada) Membership

Please fill out membership form and mail to:

MaterCare International - 8 Riverview Avenue, St. John's, Newfoundland, Canada A1C 2S5

Title: (circle) Fr / Sr / Dr / Prof / Mr / Mrs / Miss/ Ms

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

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

Email: \_\_\_\_\_ Ph: \_\_\_\_\_

Select all that apply:

- I have skills I can offer to the work of *MaterCare International*
- I am a qualified *Health Professional*: \_\_\_\_\_
- I can speak another language: \_\_\_\_\_
- Other skills: \_\_\_\_\_

## Membership Fees

- Health Professional: \$100       Resident: \$50       Supporter/Student: \$20  
Donation: \$ \_\_\_\_\_

*\*Cheques should be made payable to MaterCare International. All donations are tax deductible.*

## Payment Options:

### Cash/Cheque

Send a Cheque or Money Order to MaterCare International:  
MaterCare International  
8 Riverview Ave.  
St. John's, Newfoundland A1C 2S5 CANADA

Cheques should be made out to:  
MaterCare International (Canada) Inc

### Pay On-line

- Pay by email: [info@matercare.org](mailto:info@matercare.org). Visit your bank on-line for details.
- Pay using PayPal by visiting us at [www.MaterCare.org/Donate](http://www.MaterCare.org/Donate)

Registered Charity Number 87426 6943 RR0001

## Declaration

I accept the objectives of *MaterCare International* and agree to uphold and act in accordance with them – understanding that failure to do so may result in cancellation of my membership. I have read (doctors only) and hereby pledge the *Promise of the Catholic Physician*.

\_\_\_\_\_  
*Signed*

