



Membership Application/Renewal

Salutation: Mr. Mrs. Ms. Other: _____

First Name: _____ Last Name: _____

Phone: _____ Fax: _____ Email: _____

Address: _____

City/Town: _____ Postal Code: _____ Constituency: _____
(leave blank if unsure)

- New Membership (Annual Fee: \$10) Multi-year Membership: 2 year 3 year 4 year 5 year
- Membership Renewal (Annual Fee: \$10)
- Sign me up for a monthly contribution through the ABC plan (Membership Included)**
Amount of each cheque or withdrawal (please check): \$10 \$15 \$20 \$25 Other amount: _____

ABC MEMBERSHIP BENEFITS

ABC stands for Automatic Banking Contribution. It's an easy way for you to help build the future of our party through an automatic monthly contribution.

As an ABC member, you're eligible to take advantage of some tremendous benefits:

- Free and automatic annual renewal of party membership
- Guaranteed tax credit - up to 75% back at the end of the year
- Special discounts and invitations to exclusive receptions for ABC members.

The minimum monthly contribution is \$5 through a pre-authorized chequing plan or by credit card.

ABC TAX BENEFITS

Your ABC membership is eligible for a provincial tax credit. This is not just a deduction, it is a credit taken directly off your owed income tax.

Example:
\$10.00 per month (\$120/yr) = \$90 tax credit

That's a \$120 donation at a cost to you of only \$2.50 per month! \$20 a month only costs you \$5.00!

For the first \$400 you donate each year, you get 75% back!

I am between the ages of 14-25 and would like to be a member of the Saskatchewan Young Liberals

I would like to become involved in the following areas:

Women's Commission My Local Constituency Policy Development Other: _____

Enclosed is a cheque *(If this is an ABC membership, please include a blank cheque marked VOID)*

Charge my credit card: Visa Mastercard

Card No: _____

Name on Card: _____ Expiry (MM/YY): _____

The Saskatchewan Liberal Party is hereby requested and authorized to debit the stated account or credit card once per month, or year, depending on selected option, for payment of the amounts stated above. This authorization will be terminated 10 days after written notice is received.

By signing this form, I certify that I subscribe to the principles, aims and objectives of the Saskatchewan Liberal Party; I am a Canadian citizen or landed immigrant; I am at least 14 years of age; I am a resident of Saskatchewan; I am not a member of any other provincial political party; and I or a member of my immediate family has paid for this membership.

Saskatchewan Liberal Party
 845A McDonald Street
 Regina, SK S4N 2X5

Phone: (306) 522-8507
 Fax: (306) 569-9271
 Email: contact@saskliberals.ca

Member's Signature: _____ Date: _____

The Saskatchewan Liberal Party ["SLP"] will not disclose personal information to third parties except when we need to share information to provide you with a service you have requested or we are required to comply with subpoenas or other legal processes or if your actions in connection with the use of our website or other services violates our intellectual property rights or that of any of our members;

The SLP uses personal information for purposes of fulfilling your requests for services and information and to communicate with you. The SLP may use the information to contact you with announcements, email, press releases, and to give you other information you may be interested in. Lists used for aforementioned purposes are developed and managed under our standards designed to safeguard the security and privacy of your personal information. Any of your personal information will only be used in support of the Saskatchewan Liberal Party.



All memberships expire on December 31st of the current year.