



The Ontario Archaeological Society



1444 Queen St. East
Suite 102
Toronto ON M4L 1E1
Phone: (416) 406-5959

New Membership **Membership Renewal** **Membership Year**

Name: _____ Address: _____

City & Prov: _____ Postal Code: _____

Phone (Day): _____ Phone (home): _____

Fax: _____ -Email: _____

I am applying for/renewing my membership as indicated and I agree to abide by the Society's Constitution and Statement of Ethical Principles:

Please apply/renew my Membership as indicated:

Membership Type	Individual	Student	Family	Institutional	Amount
OAS Membership	\$45.00	\$25.00	\$52.00	\$75.00	\$
OAS Membership with OA	\$57.00	\$34.00	\$64.00		\$
Lifetime Membership	\$800.00				\$
ArchNotes mailed hard copy	\$20.00	\$20.00	\$20.00	\$20.00	\$

Please apply/renew my Chapter Membership as indicated:

Chapter	Individual	Student	Family		Amount
Grand River	\$20.00	\$15.00			\$
Hamilton	\$11.00		\$18.00		\$
Huronian	\$15.00	\$10.00	\$18.00		\$
London (Institution KEWA \$21)	\$18.00	\$15.00	\$18.00		\$
Ottawa	\$20.00	\$12.00	\$25.00		\$
Peterborough	\$12.00	\$8.00	\$15.00		\$
Thunder Bay	\$10.00	\$10.00	\$10.00		\$
Toronto	\$12.00		\$14.00		\$
Windsor	\$15.00	\$5.00	\$20.00		\$

Please accept my Donation for:

Donation Type					Amount
Awards Fund					\$
Future Fund					\$
OA Publication Fund					\$
Peggi Armstrong Fund					\$
Valerie Sonstenes Student Research Fund					\$

Date _____ Signed _____ Total \$-----

I wish to receive official communications from the OAS by email

Personal information is used only for the purpose of OAS business and will not be divulged without permission.

See the OAS Website for the Privacy Policy

(Enclose cheque, money order or credit card details. Students should enclose a copy of student identification.

Receipts for Membership and/or Donations will be forwarded to you.)

Thank you for your continuing support of the O.A.S.