



L'Association des Fournier d'Amérique

Membership or Renewal Form

Name _____ First name _____ Mr. ___ Mrs. ___ no member; _____

Address _____ City _____

Province or State _____ Postal Code or Zip Code _____

Phone number (____) _____ E-mail _____

Occupation _____

Date and place of birth _____

Spouse's name _____

Spouse's date and place of birth _____

Date and place of marriage (Cohabitation) _____

Full name of parents spouse _____

What is the first name of your first Fournier ancestor? _____

How did you hear about the AFA? _____

Web site of AFA ___ Facebook ___ Fournier newsletter ___ Family or other ___

Do you want receive the Bulletin Le Fournier by Email _____ or by post: _____

Annual Fees: Regular member 25\$ _____ Benefactor member 50\$ _____ Lifetime member 350\$ _____

N. B. American members must pay in U.S. dollars.

For the payment, you may use INTERAC or send a cheque or money order made out to the order of:

**L'Association des Fournier d'Amérique
650, rue Graham-Bell, bureau 210, Québec, QC, G1N 4H5**

11-01-2020/hf