



Zajac Ranch Society



Membership Application Form

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Telephone: _____ Business Telephone: _____

Email: _____

How did you hear about The Zajac Ranch for Children? _____

\$30.00 Annual Membership Fee Enclosed

In addition to the Membership Fee, I wish to donate:

\$25 \$50 \$100 \$250 Send a child to camp \$1,000

I would prefer to donate: \$_____

Payment:

Cheque VISA MasterCard Money Order Other _____

Monthly Payments (please enclose a credit card #) \$_____

A tax receipt will be issued to you for your donation to the Zajac Ranch for Children. Please print your credit card number clearly. If you are making your donation by cheque, please make it payable to The Zajac Ranch for Children.

Name on card: _____

Card Number: _____

Expiry Date: _____

Signature: _____ Date: _____

- Please send me more information on the Zajac Ranch for Children.
- Please contact me regarding corporate sponsorship, naming opportunities or camp wish list.
- Please contact me regarding volunteer opportunities with the Zajac Ranch or Zajac Foundation.

Please sign and forward completed forms to:

Signature: _____ Date: _____