



Registered Nurses Foundation of British Columbia

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Registered Nurses Foundation of British Columbia

Celebrate 32 Years of Supporting Tomorrow's Nurses 1979-2011

RENEW YOUR RNFBC MEMBERSHIP FOR 2011 NOW

NAME: _____

ADDRESS: _____

CITY: _____ **PROV:** _____ **POSTAL CODE:** _____

PHONE: _____ **E-MAIL** (please print clearly): _____

MEMBERSHIP DUES (please check one):

Patron:

- Initial Patron\$500
- Continuing Patron (renewal)..... \$100
- Lifetime Patron (no renewal fee)....\$5,000

Regular

- Individual.....\$50
- Group/Corporation.....\$75

Membership Dues Amount: \$ _____

ADDITIONAL DONATION(S):

I would like to make an additional donation to go to the following fund(s)

Operating Fund \$ _____

Used to fund operations, allocate to Operating and General 40 Bursaries Reserve, or to add to amount of named bursaries' accrued interest in a given year, if needed.

Founders Bursary \$ _____

This bursary is new. RNFBC has designated matching funds from the General Operating Fund for the first \$30,000 donated. See website for more information.

Other Bursary

Bursary name: _____ \$ _____

Total Additional Donation(s) Amount: \$ _____

PAYMENT DETAILS: **Total Amount (Dues plus Donations): \$** _____

My cheque is enclosed. (*Cheques should be made payable to RNFBC and mailed to the address above.*)

Please charge my VISA \$ _____ or MASTERCARD \$ _____

Credit Card Number _____ Expiry Date ____/____

Signature _____ Date _____

Thank you for supporting our mission and vision!