



# EDUCATIONAL FACILITY MANAGERS ASSOCIATION OF BC

## 2020 MEMBERSHIP FORM

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Designation(s): \_\_\_\_\_

Position/Title: \_\_\_\_\_

School District: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

SD Web Page Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Partner (Spouse) Name \_\_\_\_\_

**MEMBERSHIP FEE:** \$ 120.00 (*add \$1.00 for new members*)

Signature: \_\_\_\_\_

Cheques, MasterCard or Visa are accepted, also able to pay via web site.

<http://www.efmabc.com/join-us>

Name: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expire Date: \_\_\_\_ / \_\_\_\_ Code: \_\_\_\_\_

PLEASE RETURN TO: PO Box 19032  
1153 – 56<sup>th</sup> Street  
Delta, BC V4L 2P8  
Email: [society@telus.net](mailto:society@telus.net)