



# Bay of Quinte Dental Hygienists Society

## Membership Application/Renewal

**2010-2011**

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

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

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Number: \_\_\_\_\_ Work Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Membership Fees:

- Full Membership \$55.00
- Student Membership \$20.00 (Christmas Gala is not included)

**Please Note: Membership is due by August 27, 2010 or a late charge of \$10.00 will apply**

Please print out and mail this form, along with a cheque made out to:

"Bay of Quinte Dental Hygienists' Society"  
c/o Cathy Philbin  
339 Montrose Rd  
Belleville, ON K8R 1A8  
(613) 967-8278

Or drop off at Dr. McMahon and Dr. Tuckers (262 Dundas Street East, Belleville, ON)