

Admission or renewal form

Name, first name : _____

Spouse : _____

Address : _____

City : _____

Province/State : _____

Postal/Zip code : _____

Telephone : _____

Date of birth : _____

Date of marriage : _____

Place of marriage : _____

Membership (valid until next June 30th) : 20,00 \$ CDN (20 \$ US)

You may follow the instructions for a bank transfer on the web :

<https://familles-frechette.org>.

If you prefer to send a cheque, please address it to "Les Descendants des Fréchette inc." and send it to :

Les Descendants des Fréchette inc.
796 rue Chapleau
Mont-Saint-Hilaire, Qc
J3H 0C2