



MEMBERSHIP APPLICATION

THE OTTAWA HEART INSTITUTE ALUMNI INC.

40 Ruskin Street
Ottawa, Ontario K1Y 4W7
Canada

Name: _____

Address: _____

City: _____

Province/State: _____

Postal/Zip Code: _____

Country: _____

Email: _____

Telephone (H): _____

xxx xxx-xxxx

Telephone (W): _____

xxx xxx-xxxx

Language of Correspondence: English or French (please circle choice)

Remittance: Membership Fee \$ 15.00

I would also like to
make a donation now \$ _____

Total \$ _____

Please remit to: THE OTTAWA HEART INSTITUTE ALUMNI INC.
40 Ruskin Street
Ottawa, Ontario K1Y 4W7
Canada

Signature: _____

Tax receipts will be issued for all donations. Please note that while donations are tax deductible, the \$15.00 membership fee is not tax deductible. Membership fees are the only funds that the Alumni use to cover the costs of operations and administration. All donated funds are used exclusively to purchase equipment and fund other activities that contribute directly to patient care and comfort in the Heart Institute.