



REPLACEMENT OF A LOST OR STOLEN MEMBERSHIP CARD

DATE : _____

This form applies to members who have lost their card, or for those who had their card stolen or destroyed.

Please fill out all the requested information.

Please note that there is a 10.00\$ fee to replace your membership card. Please pay this fee to your community.

Name: _____

Surname: _____

Address: _____

City: _____

Province: _____

Postal Code: _____

Telephone: _____

Email: _____

Date of birth: _____

Community: _____

Nation of origin: _____

Name of parents: Mother: _____

Father: -----

Name of children: _____

Member signature: _____



IDENTIFICATION
PHOTO AND SIGNATURE MANDATORY

YOUR PHOTO HERE
MAX 2 X 2 ³/₄



PLEASE ATTACH A PASSPORT PHOTO IN COLOUR (2 x 2 ³/₄) AND PROVIDE A CLEAR SIGNATURE, IN BLACK INK, IN ONE OF THE ABOVE RECTANGLES. DO NOT CROSS OR TOUCH THE LINES.