

**LEARNING DISABILITIES ASSOCIATION OF NEW BRUNSWICK
TROUBLES D'APPRENTISSAGE-ASSOCIATION DU NOUVEAU-BRUNSWICK**

203- 403 REGENT STREET, FREDERICTON, NB E3B 3X6
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Web site: www.nald.ca/ldanb Email: ldanb_taanb@nb.aibn.com



Memberships: (\$25.00)

- Renewing my membership.
- Will encourage others to become members.

Casual Days:

- Will suggest that LDANB be considered as a recipient of casual day where I work.
- Will ask the people I do business with – bank, school, etc.—if they will do a casual day for LDANB.

Donations:

- Gift donations to mark special occasions. _____
- In memory of _____
(Appropriate cards will be provided.)

- \$10.00 \$20.00
- \$50.00 \$100.00
- \$ _____ donation

Name: _____

Address: _____

Phone/Fax: _____

Email: _____

I am enclosing:

- Cheque.
(Please make payable to Learning Disabilities Association of New Brunswick)

OR

- VISA Card # _____
- Expiry Date: _____
- Signature: _____

Tax receipts issued for donations over \$10.00.