

The West Nova Scotia Regiment Regimental Association

Serving West Novas -- Past and Present Associate Member Application

This application form is intended for use by persons seeking Associate Membership in the WNSRRA. **Please type or print in BLOCK letters**

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Applicant's Name:	Mr □ Mrs □						
	Ms 🗌	Surname	Given n				
Address:							
	Number/PO Box/ RR	#/Street	City/town	Province	е	Postal Code	
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		ets					
		se		_	ng 🗌 Niece	:/Nephew of a	
I am: ☐ a Ca	anadian citizen [☐ Commonwealth	subject □USA	∖ citizen	TO country of	itizen.	
Service Info	ermation for Ass	ociate Membersh	ip:				
Person who served: Self or:				Relationship: who			
is/was a membe	er of the WNSR 🗌 o	r its affiliated RCAC C	orps Corps No. a	and Location:			
		To: _					
		gimental Association d					
Applicant's Siç	gnature:		Date:				
Please sub	se submit application to: Please submit annual dues of \$30 with your application Cheque should be made payable to						
WNSRRA Secretary			_	WNSR Regimental Association.			
5086 Hwy 357 Dues may also					•	rough	
Elderbank,	NS B0N 1K0		•	yPal at www.wnsr.ca/ra ur application will be processed, and you will be			
Or amail to	racooty@amail a	• •			•	•	
Oi emaii to	rasecty@gmail.c	OH	made aware, at the earliest opportunity if your application is accepted.				