

DONATE TO THE SSEA/RENEW YOUR SSEA MEMBERSHIP TODAY

YES! I would like to renew my SSEA Membership for the year 20__ - 20__

If you are renewing for more than one year, please indicate all other years here:

.....
(Name)

.....
(Address)

.....
(City & Province/State)

.....
(Postal/Zip Code)

.....
(Country)

.....
(Email address)

.....
(Phone number)

I consent to having the SSEA/SEEA contact me about Society matters & events _____

- | | | |
|--|-------------------------|--|
| <input type="checkbox"/> Annual Full Individual | \$70.00 per year | <input type="checkbox"/> Overseas/USA (paid in US funds) |
| <input type="checkbox"/> Annual Student | \$35.00 per year | <input type="checkbox"/> Overseas/USA (paid in US funds) |
| <input type="checkbox"/> Annual Associate* | \$50.00 per year | |
| <input type="checkbox"/> Annual Institutional | \$80.00 per year | <input type="checkbox"/> Overseas/USA (paid in US funds) |

ALL CATEGORIES OF MEMBERSHIP FOR OVERSEAS AND AMERICAN MEMBERS ARE PAYABLE IN US FUNDS

* Associate membership is only available to residents of Ontario, Quebec, British Columbia & Alberta. Associate members do **not** receive the *Journal* but do receive the *Newsletter*.

PROOF OF STUDENT STATUS [ie. Student Number & name of institution]:

..... [please attach scan/photocopy of ID]

I would prefer to receive my publications in Electronic Format only / Paper & Electronic Format
Canadian/US members who take their publications in electronic format only are eligible for a tax receipt. Check here if you have taken electronic publications and would like to receive a tax receipt

I enclose a: cheque / money order for Canadian funds / US funds
made payable to **The Society for the Study of Egyptian Antiquities**

I would like to pay by **credit card**: VISA/ AMEX/ Mastercard

..... Expiry Date _____ [mm/yr]

CASH PAYMENT (IN PERSON ONLY)

Payment through **PayPal** is available. Use sseafundraising@gmail.com as the recipient on the **Send Money** tab of the PayPal website and please include your name, membership type, and the years you wish to renew for in the message section of the payment.

I WOULD LIKE TO MAKE A TAX-DEDUCTIBLE DONATION TO THE SSEA IN THE AMOUNT OF: \$.....

CHARITABLE REGISTRATION NO. 13319 4704 RR0001

This donation is intended for the SSEA as a whole / a specific Chapter (specify)

MAIL TO: sseainfo@gmail.com OR by post:

**The Society for the Study of Egyptian Antiquities, Attn: SSEA Membership Secretary,
PO Box 19004 Walmer, 360A Bloor St W, Toronto, Ontario, M5S 3C9 CANADA**