



**Langley
Hospice Society**

Mission Statement

Langley Hospice Society, a community based, non-profit organization, provides compassionate support to help people live with dignity and hope while coping with grief and the end of life.

MEMBERSHIP APPLICATION FORM

I hereby make application to the Langley Hospice Society for membership. I understand that as a member of the Society I will receive all newsletters and will be entitled to vote at the Society's Annual General Meeting. The annual membership fee is \$10.00.

Name: _____

E-Mail Address: _____

Mailing Address: _____

Telephone: _____

I would also like to make a donation of: \$ _____

Payment Method: Enclosed is my cheque or money order made payable to the
Langley Hospice Society.

I prefer to use my credit card (we can only accept Visa card payments at this time):

Card No.: _____

Amount: _____ Expiry Date: _____

Name (as it appears on card): _____

Signature: _____

Please mail your completed form to: Langley Hospice Society
20660 - 48 Avenue
Langley, BC V3A 3L6

Questions? Please contact us by phone at 604-530-1115 or by e-mail at info@langleyhospice.com.