

**Leaside Towers Tenants Association (LTTA)
Annual Membership Form 2018 - 2019**

Contact Information (Please print very clearly)

Name/s: _____

Building #: _____ Suite #: _____

Telephone # (optional): _____

Email address (optional): _____

Type of Membership (please check)

- New member \$10.00 per unit per year
- Renewal \$10.00 per unit per year

Payment Method (please check)

- Cash
- Cheque (please make cheques payable to Leaside Towers Tenants Association)

Signature: _____ **Date:** _____

Please complete this form and return it with your payment to:

- Suite # **3801**, Building **85** **OR**
- Suite # **1102**, Building **95** **OR**
- Hand it to the person at the Membership table at the next LTTA Meeting

Your Membership Card (= receipt) will be delivered to you either through your mailbox or at the next LTTA meeting

Thank you for your support!

Leaside Towers Tenants Association

Website: www.lttaplus.ca/

Email: ltta@littaplus.ca