



SSCA Membership Application

Primary Contact Name _____ **Spouse/Partner** _____

Mailing Address

_____ **City** _____ **Cottage Tel** _____
_____ **Province/State** _____ **Home Tel.** _____
_____ **Postal/Zip Code** _____

	Business Tel.	Email Address
Primary Contact		
Spouse/Partner		

Island Name(s) and Number(s)

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SSCA Annual Dues

Please remit your payment of \$140.00 for yearly dues payable to:

SANS SOUCI AND COPPERHEAD ASSOCIATION

Please mail to:

Sans Souci and Copperhead Association
c/o Sue Anderson
500 Avenue Road, Suite 1008, Toronto, ON M4V 2J6
Phone (416) 860-0100 Fax (416) 860-0580
E-mail: permanentsecretary@ssca.info

For further information on the SSCA please contact our membership director, Eric Armour at membership@ssca.info

Thank you for joining the SSCA!