

**MEMBERSHIP APPLICATION
COMOX ARCHIVES AND MUSEUM**

Annual Membership

Individual: \$10.00 per year

Family: \$20.00 per year

Name: _____

Address: _____

Postal Code: _____ **Phone:** _____

Email: _____

**Please Mail to: Comox Archives and Museum or Drop in and see us
1729 Comox Avenue
Comox, BC V9M 3M2
250 - 339-2885**

Hours of Operation: Thursday through Saturday 10:00 AM –2:00 PM