



## Long Term & Continuing Care Association of Manitoba Membership Application Form

*Be recognized for your support for seniors and staff in long term & continuing care  
Become a member today!*

### Commercial Affiliate Membership Application Form

---

Please complete the following information:

Company Name: \_\_\_\_\_

\*Corporation Legal Name (if different from above) : \_\_\_\_\_

Address: \_\_\_\_\_ City/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Please list the type of services/products offered and your interest in supporting seniors and staff in long term & continuing care:

---

---

---

---

---

---

---

---

Membership fee is \$650.00 per year: April 1 – March 31. LTCAM will invoice you a prorated amount depending on your date of application.

\*Name of person to receive invoice: \_\_\_\_\_ Email: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

#### Upon receipt of invoice, please make your cheque payable to:

Long Term & Continuing Care Association of Manitoba,  
202-135 McGregor Street, Winnipeg, MB R2W 4V7  
Phone: 204-477-9888; Fax: 1-888-820-1647,  
www.ltcam.mb.ca Email info@ltcam.mb.ca

How did you hear about LTCAM?

Website  Mail/Brochure  Email  Other \_\_\_\_\_