



Institutional Membership

Name of Institution: _____

Name of Institutional Representative: _____

E-mail: _____

(This individual will be entitled to vote at meetings and hold office and is not eligible for individual membership.)

Street Address: _____

City/Town: _____ Postal Code: _____

Telephone: _____ Web Site _____

Type of membership (please check one box):

General member (annual dues: \$30) General institutional membership is open to any institution wishing, through the payment of membership dues, to support the objectives of the Council. General members may not vote at meetings or hold office. General members are not eligible for funding from any grant programs administered or adjudicated by the Council.

Archives operated by volunteers (annual dues: \$70)

Development institutional membership (annual dues: \$65) is open to any establishment in Saskatchewan that is engaged or interested in archival work but does not qualify for institutional membership.

Archives operated by full-time or part-time paid staff (annual dues: \$120)

Donation: _____ Receipt required. Email address if different than above: _____

Consent (This membership application will not be processed unless a consent box is checked.)

I hereby consent for SCAA to use the prescribed email address for electronic communications, including emails, newsletters, event newsletters, invitations, event notices, notifications, and other information that is relevant to you and your business and/or the SCAA.

No I do not wish to receive electronic communications from SCAA.

To join, please send this completed form along with your payment to:
Saskatchewan Council for Archives and Archivists
PO Box 31122 RPO Normanview, Regina, SK S4R 8R6
Email: scaa@sasktel.net

