

# Canadian Coalition for Health and Environment (CCHE)

## Membership Form

Name	_____
Address	_____
City	_____ Postal Code _____
Telephone	
Home	_____ Work _____
Fax	_____ E-mail _____
Profession	_____ Occupation _____
Signature	_____
Subscription for one member: 10\$	
Subscription for a group or an organisation: 25\$	
Number of members in the Group _____	
<i>Please do not share my name with other mailing lists</i>	

You are invited to become a member of CCHE if you believe in our mission and goal.  
CCHE reserves the right to restrict or refuse membership.

Please send completed form by snail mail to:

The Canadian Coalition for Health and Environment  
c/o Glenda Whiteman  
31 Alloway Avenue  
Winnipeg, Manitoba R3G 0Z7

Phone: (204) 229-9613  
Email: [cche@mts.net](mailto:cche@mts.net)

[www.cche-info.com](http://www.cche-info.com)