



Membership Form

Please fill out form and email form to info@hahahakidzfest.com. Current payment methods are cheque or cash.

Name: _____
First *Last*

Address: _____
Street Address *Apartment/Unit #*

City *Province* *Postal Code*

Phone: _____ Email: _____

Membership Type: Individual \$10 Family \$15 Organization \$20

Organization name if applicable: _____

Payment: Cheque Cash Other

Signature: _____ Date: _____

Please email form to info@hahahakidzfest.com. Current payment methods are cheque or cash.

Thank you for your support!