FKMP Membership Form – Membership valid until: 20___-03-31

Family ($15)_____ Single ($10)_____

Name(s)_____/_____
Last Name First Name
_____/_____

Address: _____Kelowna, BC

Postal Code:_____ Phone:_____

E-Mail:_____

Please enclose a cheque to: Friends of Knox Mountain Park for the appropriate amount and mail to: Friends of Knox Mountain Park, P.O.Box 22048, Capri Postal Outlet, Kelowna, BC V1Y 9N9