



Regroupement  
Soutien aux Aidants  
Maison Gilles-Carle  
Brome-Missisquoi

## NEW MEMBERSHIP FORM

APRIL 1 2026 TO MARCH 31 2027

Annual cost per person: \$ 30.00

ACTIVE CAREGIVER

VOLUNTEER

**NEW MEMBERSHIP**

NON ACTIVE CAREGIVER

SUPPORTER

### MEMBER INFORMATION

LAST NAME	
FIRST NAME	
ADDRESS	
TOWN	
POSTAL CODE	
HOME PHONE NUMBER	
CELL PHONE NUMBER	
EMAIL ADDRESS	
BIRTH DATE	
SPOKEN LANGUAGE	

### INFORMATION ON YOUR LOVED ONE

FIRST AND LAST NAME	
CAREGIVER SINCE	
LOVED ONE DATE OF BIRTH	
LOVED ONE DISABILITY	
RELATIONSHIP WITH LOVED ONE	

**By becoming a member, you will receive our newsletters. You can unsubscribe at anytime.**

**Please take note that your renewal on April 1<sup>st</sup> each year is necessary to have access to our services. Thank you!**

Amount :

\_\_\_\_\_ \$

Cash / Debit / Interac transfer / Bank transfer

Check (Please make your check payable to Regroupement Soutien aux Aidants de Brome-Missisquoi)

Credit card No. : \_\_\_\_\_ Exp. \_\_\_/\_\_\_ CVC \_\_\_\_\_

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

MEMBER SIGNATURE : \_\_\_\_\_ DATE: \_\_\_\_\_

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