



PHYSICIANS FOR GLOBAL SURVIVAL
MÉDECINS POUR LA SURVIE MONDIALE
CANADA

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MEMBERSHIP

I want to be a PGS member, and support initiatives for peace and disarmament.

Physician -- \$120 Retired Physician / Associate (Other Occupation) -- \$60 Student -- \$25

DONATION

I would like to make a donation of \$ _____

PEACE PLEDGE PLAN (MONTHLY GIVING)

I want to join the PGS Peace Pledge Plan by giving \$ _____ per month.

Monthly donors are automatically credited with PGS membership.

PAYMENT METHOD

Cheque enclosed: *Please make payable to Physicians for Global Survival (Canada).*

** If you are joining the Peace Pledge Plan and want us to withdraw monthly donations from your bank account, please provide a void cheque.*

VISA MasterCard American Express

Card Number _____ Expiry Date _____

Signature _____ Date _____

Phone # _____ E-mail _____

Thank you for your generous support

