



Icelandic Memorial Society of Nova Scotia

Membership Application and Renewal Form

Name _____ Phone: () _____

Address _____

Email: _____

Postal / Zip Code _____

- Single Membership \$10 Family Names: _____
- Family Membership \$20 _____
- Corporate Membership \$50 _____
- Membership Renewal _____

Please make cheque payable to: Icelandic Memorial Society of Nova Scotia
Bonnie Price, Treasurer
219 Old Post Road, Smiths Cove
Digby, NS B0S 1S0

e- transfers (Canadian residents) novascotiaicelanders@gmail.com

The Society continues to research family histories in Markland. If you have any articles, stories, photographs or artifacts, the Society would like to hear from you.

Direct descendent of a Markland family: _____
(Family name)

I have information or photos to share with the Society

I would like to make a donation to the Society