



Dauphin's Countryfest Inc.  
 28 – 2nd Avenue NE  
 Dauphin, MB R7N 0Z4  
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 Toll Free 1-800-361-7300  
[www.countryfest.ca](http://www.countryfest.ca)  
 cfest@mts.net

I do hereby apply for a Lifetime Non-Refundable Membership in **DAUPHIN'S COUNTRYFEST**.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Membership Name (if different from above): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ P. Code \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: (\_\_\_\_\_) \_\_\_\_\_

Preferred Campsite:

- Upper (currently sold out)      Campsite # \_\_\_\_\_
- Heritage      Campsite # \_\_\_\_\_
- Fisher      Campsite # \_\_\_\_\_
- Lower Rush / Back 40 Rush      Campsite # \_\_\_\_\_

Preferred Reserved Seat(s):

- Level 1      Row # \_\_\_\_\_      Seat # \_\_\_\_\_
- Level 3      Row # \_\_\_\_\_      Seat # \_\_\_\_\_

Membership fee: TWO HUNDRED AND FIFTY (\$250.00) DOLLARS.

Payment Enclosed:		
Visa / MC # _____ / _____ / _____ / _____	Exp _____ / _____	
or Cheque # _____ (payable to Dauphin's Countryfest)		
<b>(Office Use Only)</b>	Processed on Order _____	Membership Card # _____