



SCHIZOPHRENIA SOCIETY OF NOVA SCOTIA
A REASON TO HOPE. THE MEANS TO COPE.

The mission of the Schizophrenia Society of Nova Scotia (SSNS) is to improve the quality of life for those affected by schizophrenia and psychosis through education, support services, public policy and research.

MEMBERSHIP FORM

Annual individual membership: \$15.00

The annual membership is valid from September 1st to the following August 31st, and includes email messages exclusive to members, subscriptions to *A Future With Hope* and *Information Matters*, and reduced fees to SSNS conferences and events.

NAME _____

ADDRESS _____

TELEPHONE _____

EMAIL _____

Chapters of the Schizophrenia Society of Nova Scotia convene monthly education & support meetings. If applicable, please check your choice for affiliation at no additional cost:

Cumberland County HRM Kings County Lunenburg County

In addition, I would like to make a TAX DEDUCTIBLE DONATION in the amount of \$ _____ (optional).

Please mail to:

Schizophrenia Society of Nova Scotia
Room B-23, E.C. Purdy Building
P.O. Box 1004, Stn. Main
Dartmouth, Nova Scotia B2Y 3Z9

Thank you!