Manitoba Agricultural Museum Memorial Wall Application Form

If you would like to have a relative or friend, who volunteered at the museum, remembered by having their name inscribed on the Memorial Wall, please submit the following information together with fee of \$100 per name. Cheques payable to The Manitoba Agricultural Museum.

| Name: | (please print) |
|--|---------------------------|
| Home Town: | |
| Area(s) volunteered: | |
| Name Submitted by:Address: | |
| Telephone: | |
| E-mail Address: | |
| For more information please contact: | For Office Use Only |
| The Manitoba Agricultural Museum P.O. Box 10 Austin, Manitoba Telephone: 1-204-637-2354 E-mail: agmuseum@mymts.net | Fee submitted (yes) Date |