

Chapleau Express Subscription Form

NAME: _____

ADDRESS: _____

CITY/TOWN: _____

PROVINCE/STATE: _____

POSTAL CODE/ZIP CODE: _____

Gift Subscription

Mail to

NAME: _____

ADDRESS: _____

CITY/TOWN: _____

PROVINCE/STATE: _____

POSTAL CODE/ZIP CODE: _____

ONE YEAR : for Canadian addresses \$80.00 (incl. HST)

ONE YEAR : for US addresses \$150 Can\$

Please mail this form with your cheque or money order to:

Chapleau Express

P.O. Box 457

Chapleau (Ontario) P0M 1K0



Credit Card #: _____

Expiry: _____

With the Chapleau Express, you stay connected.