



MEMBERSHIP APPLICATION

INDIVIDUAL, FAMILY & LIFETIME

Name: _____
Last First Middle Initial

Address: _____

City: _____ Province _____ Postal Code: _____

Telephone: (H) _____ (M) _____

Email: _____

Would you like to receive our emailed NEWSLETTER? (please circle) Yes No

Birthday: _____
Month Day

MEMBERSHIP CATEGORY:	INDIVIDUAL Membership	\$10.00
	FAMILY Membership	\$ 15.00
	LIFETIME Membership	\$500.00
	DONATION <i>THANK YOU</i>	\$ _____

*Any donations \$500.00 or more will be given a lifetime membership

FAMILY Membership: _____ Number of family members: _____
Family Members Names: _____

Consider **VOLUNTEERING** with People In Motion!

Fundraising _____ Board of Directors _____ Committee Work _____
Office Support _____ Cedar Creek Camp _____ Active Living Programs _____
Other: _____

- I understand the information I have provided on this form will be used by People In Motion for the purpose of agency business only and is protected under the provincial Privacy Act.
- I consent to photographs of myself/family to be taken during People In Motion events and they be used for possible promotions in the future.

Signature

Date

NEW MEMBER _____
Renewal _____