



**2016 - 2017**

**Surrounded by Cedar Child and Family Services  
\$1.00 Membership Application**

**PLEASE PRINT CLEARLY**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Ancestry/Community/Organization: \_\_\_\_\_

Preferred Method of Contact:  Email  Mail

***Please note (as per our constitution and by laws) memberships expire the day before the AGM.  
This means a new membership card will be required to entitle you to vote at the meeting.***

**OFFICE USE ONLY**

MEMBERSHIP FEE RECEIVED:

SIGNED BY: \_\_\_\_\_

DATED: \_\_\_\_\_