

CFUW SAANICH PENINSULA MEMBERSHIP FORM

To comply with the **Personal Information Protection Act**, we need permission to include your pictures on the CFUW Saanich Peninsula website and in our Club photo albums. If you agree, please check the YES box below and sign in the space provided. If you prefer NOT to have your photograph taken, please check the NO box and sign.

___ Yes ___ No

Signature _____ Date: _____

GENERAL DISCLAIMER

Members participating in all events and activities sponsored and organized by CFUW Saanich Peninsula do so at their own **risk** and are responsible for their own safety.

Signature _____

Date _____

MEMBERSHIP FORM

Membership Status (circle one) New _____ Renewal _____

If Dual, Your Home Club _____

Name _____

Address _____

Town _____

Postal Code _____

Phone Number _____

Email Address _____

Emergency Contact Name _____

Phone Number _____

Education (optional) _____

Areas of Interest (optional)

Annual Full Member Dues (\$120); Dual Member Dues (\$65); Student (\$60)

(Please make cheque payable to CFUW Saanich Peninsula or e-transfer to cfuwsptreas@gmail.com)

(If you write a cheque payable to the CFUW Saanich Peninsula Education Trust Fund or e-transfer, a Tax Receipt will be issued.)

Complete this form, attach your cheque (s) and mail it to:

The Membership Convenor
CFUW Saanich Peninsula
PO Box 20062, Beacon Avenue Post Office
Sidney, BC V8L 5V9

**Completed Forms and Dues must be received by May 31
for your name and contact information to be included in the Club Directory.**