



**Whitevalley Community Resource Centre
Membership Form
(** are required fields)**

Please print:

** Name: _____

** Address: _____

** City: _____ Province: _____ Postal Code: _____

** Phone: _____ ** E-mail: _____

** I am a:

- New Member
- Former Member
- Receipt requested

I would like to make a donation in lieu of a membership fee in the amount of;
(memberships are not tax deductible)

- \$1
- \$5
- \$10
- Other _____

WHITEVALLEY COMMUNITY RESOURCE CENTRE

Relevant bylaws

- **A member is expected to act in a manner supportive of the Society.**
- **Every member shall uphold the constitution and comply with these bylaws.**
- **Attendance of members at the Annual General meeting must be in person**

** I understand, accept and agree to;

- Uphold the bylaws of the Society including those stated above
- Receive AGM notice via email

And to receive, via email;

- Newsletters
- Notice of upcoming groups, events, etc.

For office use:

- Update database
- Membership card #
- Letter

** By signing below, I accept membership into Whitevalley Community Resource Centre

** Signed: _____ Date: _____

Complete and submit to:
P.O. Box 661, Lumby, BC, V0E 2G0
Fax : 250-547-6285
E: info@whitevalley.ca