



565 Guilbault Street, Winnipeg, Manitoba

MEMBERSHIP APPLICATION FORM (PLEASE PRINT)

Date: _____ / _____ / _____
Month Day Year

Membership: NEW Renewal

Name _____

Phone # _____ Date of Birth (month/day/year) _____

Address _____

City _____ Postal Code _____

E-mail _____

PLEASE REVIEW CONSENT RELEASES ON REVERSE

PERSONAL EMERGENCY CONTACT

Name _____ Relationship _____

Phone # _____ Cellular # _____

Address _____

In case of a Health Emergency 911 will be contacted

1. Do you have any health issues of which Archwood 55 Plus should be aware?
YES [] NO [] If yes, please explain _____

2. Languages Spoken _____

3. How did you hear about Archwood 55 Plus? _____

4. Are you interested in volunteer opportunities? YES [] NO []

Annual Membership Fee \$25.00 PAID BY Cash [] Cheque []
Fees are payable to Archwood 55 Plus Inc. Receipt # _____

PRIVACY STATEMENT

Archwood 55 Plus Inc. collects information to identify our members in order to respond to their needs. We are committed to protecting the privacy of your personal information in accordance with the Personal Information Protection and Electronic Documents Act (PIPEDA). Confidential information will not be released.



565 Guilbault Street, Winnipeg, Manitoba

MEMBERSHIP APPLICATION FORM (PLEASE PRINT)

Email Consent

- NO**, I do not want to receive emails from Archwood 55 Plus Inc.
- YES**, I give Archwood 55 Plus Inc. consent to send emails that concern programs, activities, events, promotions, updates and newsletters to my email address listed below. I understand that I can unsubscribe from receiving these emails at any time.

My email address: _____

Print Name: _____

Signature: _____ Date: _____

.....

Photography Consent

- NO** I do not give Archwood 55 Plus Inc. permission to use my photograph and understand it is my responsibility to stand aside from any group being photographed.
- YES** I, (print name) _____ give Archwood 55 Plus Inc. the absolute right and permission to use my photograph(s) and/or photographs of me, in its promotional materials and publicity efforts. I understand the the photograph(s) may be used in a publication, print ad, direct-mail piece, electronic media (e.g., Internet, video) or other form of promotion or information. I release Archwood 55 Plus Inc., its agents, staff, and the photographer from liability for any violation of any personal or proprietary right I may have in connection with such use.

Print Name: _____

Signature: _____ Date: _____

PRIVACY STATEMENT

Archwood 55 Plus Inc. collects information to identify our members in order to respond to their needs. We are committed to protecting the privacy of your personal information in accordance with the Personal Information Protection and Electronic Documents Act (PIPEDA). Confidential information will not be released.