



Oct 2019 - Sep 2020 Membership Application Form

Membership valid until the September 2020 Annual General Meeting

Please make cheque payable to West End Seniors' Network.

Submit completed form and payment to:

Barclay Manor
1447 Barclay Street
Vancouver, BC V6G 1J6

Kay's Place
118-1030 Denman Street
Vancouver BC V6G 2M6

Today's Date:

DD MMM YYYY

I am a **first time member**:

Yes No

I would like information about **volunteer opportunities**:

Yes No

Photo Consent: I consent to WESN taking and using photographs of me in print, online, or video materials, with or without my name, for any lawful purposes.

Yes No

Payment	
<input type="checkbox"/> Annual Membership Fee	\$10.00
<input type="checkbox"/> Donation to West End Seniors' Network	\$ _____
<input type="checkbox"/> I want my donation to be anonymous.	
<input type="checkbox"/> Newsletter Postage Fee	\$23.00
<hr/>	
Tax receipts are issued for donations of \$10.00 and over.	
Total: \$ _____	
Charitable Registration Number: 119292845RR0001	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque

Prefix:	First Name:	Last Name:		
Address:		City:	Province:	Postal Code:
Date of Birth (DD/MMM/YYYY):		Gender:		
Phone Number:	<input type="checkbox"/> Home	<input type="checkbox"/> Cell	<input type="checkbox"/> Work	
Alternate Phone Number:	<input type="checkbox"/> Home	<input type="checkbox"/> Cell	<input type="checkbox"/> Work	
Email:	<input type="checkbox"/> DO NOT send me e-mail updates, including the monthly newsletter.			
Emergency Contact Name:	Emergency Contact Relationship:	Emergency Contact Phone Number:		

WESN will not disclose my information without my consent, unless requested under the Societies Act, and will not rent, sell or trade their contact list.

For Office Use Only

Membership Card Issued: Cheque #: Receipt #: Location: BM KP C&C

Staff/Volunteer (initial): Revenue Control (initial): Revenue Control Sheet #: Data Entered By (initial):

Optional This section will be removed and used only to better understand the WESN membership. **2019-2020**
Your answers will remain anonymous and will not be attached to your name or other identifying information.

I identify with the following ethno-cultural group(s):

My marital status is (please select one):

Single Married / Common-Law Widowed Divorced / Separated

My current housing arrangement is (please select one):

Rent Own Subsidized Other: _____

I identify as (please select all that apply):

Heterosexual Gay / Lesbian Bisexual / Pansexual Transgender Other: _____

My individual annual income is (please select one):

Up to \$17,688 \$17,689 - \$25,000 \$25,001 - \$38,400 Over \$38,400