

## **Cook Street Village Activity Centre**

1-380 Cook Street Victoria BC V8V3X7
E-mail: csvac@shaw.ca Website:cookstreetvillageactivitycentre.ca
Tel:(250) 384-6542 Fax: (250) 384-7156

## **MEMBERSHIP APPLICATION**

(PLEASE PRINT)

Title:	Mr	Mrs	Ms	Miss	_ Dr
Surname:					
Given Name:					
Address:					
City:					Postal Code:
Date of Birth:					
Telephone:					Cell. Phone:
E-mail:					Do Not Contact:
Emergency Contact:					
Name: Relationship:					Tel:
Doctor:					Tel:
Hobbies and Interest	s:				
Are You Interested in	Volunte	ering?	Yes		No
Membership Fee:		\$50.00 / nt Amount:	•		(Cheque, Cash, Visa or Mastercard) Received by (Initials):
	•		_		and conditions of such members as confidentiality of my information will be
Signature:				[	Date:

CSVAC VISION STATEMENT

To provide a positive environment for enjoyment and personal growth through Community interaction.



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## MEMBERSHIP AGREEMENT

We are very happy to have you as a member of the Cook Street Village Activity Centre, a non-profit organization offering social, educational and recreational activities for mature adults of all ethnic and cultural backgrounds.

CONFIDENTIALITY: Please respect any confidential information that you may hear while at the Cook Street Village Activity Centre including other members, volunteers, donors, staff and others involved.

PRIVACY: The Cook Street Village Activity Centre collects information from you to assist us for the purpose of providing member services. The information we collect is treated as highly confidential and will never be released to any other organization. Please be aware that we occasionally take group photos of events and activities in which you may appear. By signing you give consent to use the information as specified above.