



Membership April 1, 2021 – March 31, 2022

Renewal

New Member

Last Name: _____ First Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____ Phone Number: _____

City of Pembroke Laurentian Valley Petawawa Other(Specify) _____

By providing your email address you agree to receive communications from the Centre.

Email Address: _____

Please print email address clearly.

Membership: 50-54 55-60 61-70 71-80 81-90 90+(congratulations)

EMERGENCY CONTACT

Name: _____ Relationship: _____

Home Phone# _____ Cell# _____ Work# _____

Volunteers are vital for the continuous operation of the Centre. Are you interested?
Please check one

Yes(Volunteer Form to be completed) At a later date (Form to be completed)

What are your skills, interests,/suggestions? Trips/travel; Seminar topics; programming, etc.

If you are a new member, where /how did you hear about the Centre?

- Activity Friend/Family Current Member Advertising/Newspaper
- Facebook Website Newsletter Other

Please complete the Code of Ethics and sign the Waiver Form on page 2

