

42 RENFREW STREET PEMBROKE, ONTARIO K8A 7T6

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MEMBERSHIP YEAR

RENEWAL OR NEW

2024-2025

LAST NAME

FIRST NAME

ADDRESS

CITY

PROVINCE

POSTAL CODE

MUNICIPALITY

YOU AGREE TO RECEIVE COMMUNICATIONS FROM THE CENTRE

BY PROVIDING YOUR EMAIL ADDRESS

PHONE NUMBER

YEAR OF BIRTH

EMERGENCY CONTACT NAME

EMERGENCY CONTACT NUMBER

VOLUNTEERS ARE VITAL FOR THE CONTINUOUS OPERATION OF THE CENTRE. WOULD YOU BE INTERESTED IN VOLUNTEERING? (CLICK ON CHOICE BELOW)

YES, PLEASE COMPLETE VOLUNTEER FORM

PLEASE CONTACT ME LATER

HOW DID YOU HEAR ABOUT THE CENTRE? PLEASE CLICK ALL APPLICABLE METHODS

FRIENDS/FAMILY

CURRENT MEMBER

FACEBOOK

WEBSITE

OTHER (PLEASE PROVIDE)

NEWSLETTER

ADVERTISING/NEWSPAPER

We are always looking for ideas to improve our offerings. Please provide any skills, interests, or suggestions you may have that would help us to ensure we continue to provide quality programs to our members.