

MAYNE ISLAND COMMUNITY CENTRE SOCIETY MEMBERSHIP APPLICATION FORM

DATE: _____

INDIVIDUAL (\$5) NAME: _____

FAMILY (\$10) (Please List All Names): _____

MAYNE ISLAND ADDRESS: _____

TELEPHONE: _____

CELLPHONE AND/OR OFF-ISLAND TELEPHONE: _____

EMAIL: _____

MEMBERSHIP AFFILIATION: _____

(e.g. Tennis, Fitness, Yoga, Tai Chi, Community Gardens, etc)

VOLUNTEER PROGRAMS: The Mayne Island Community Centre Society operates entirely through volunteer efforts. Please indicate below your area of interest in which you would like to assist the community centre, or if you have a special talent or have some spare time to devote to this community facility.

Please make cheque payable to:
Can be mailed to:

Mayne Island Community Centre Society
493 Felix Jack Road
Mayne Island, BC V0N 2J2

Thank you for joining us!

The Mayne Island Community Centre Society
(Reg 1994) Non-Profit Society
Charitable Reg #32202