



MEMBERSHIP APPLICATION

CFUW SALT SPRING ISLAND

Last name _____

First name(s) _____

Street address _____

City/Town _____

Province _____ Postal Code _____

Home Phone _____ Work _____

E-mail address _____

Education (optional) _____

Are you interested in serving on your Club executive? Other?

**Membership dues include SSI Club dues; provincial/regional dues;
and national (CFUW dues).**

Total: \$70.00

May we print your contact information in the Club Directory? All information provided on this form is for Club use only. It will be held in strict confidence.

October 17, 2021