

# PRIDE WINNIPEG FESTIVAL INC.

## MEMBERSHIP APPLICATION FORM

**INSTRUCTIONS:** Please read the form in full first before filling out any information. If you will be writing in the information please write the information in print-style (not cursive). Please complete all fields.

**PRIVACY:** We recognize and respect the importance of privacy. Personal information that we collect from this form will be used for the purposes of Membership only.

**GENERAL:** An individual seeking to participate as a voting member of Pride Winnipeg must complete and submit this Membership Application Form. There is an annual \$10 CAD fee for membership. The following conditions must be met for a membership application to be considered complete:

(i) a completed Membership Application Form

(ii) Payment of \$10 CAD application fee. Cheques must be made to the order of 'Pride Winnipeg Festival Inc.'

(iii) Payment will be waived if 8 hours of volunteer time was provided during the 2017/2018 membership year.

Please note: Pride Winnipeg reserves the right to accept or decline any application without liability. If your application is not accepted, your application fee will be refunded.

Are you a new or renewing member? New  Renewing

Did you provide 8 hours of volunteer time during the 2017/ 2018 membership year? Yes  No

FIRST & LAST NAME (as appears on ID) \_\_\_\_\_

PREFERRED NAME (if applicable) \_\_\_\_\_

VOLUNTEER DETAILS (when/ where/ or team lead) \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY/TOWN \_\_\_\_\_

PROVINCE \_\_\_\_\_

POSTAL CODE \_\_\_\_\_

EMAIL \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

SEND THIS FORM TO:

Pride Winnipeg  
PO Box 2101 Station Main Winnipeg, MB  
R3C 3R4

By signing below I acknowledge that I have read this form in its entirety, I comprehend the information in this form and that the information submitted is accurate to the best of my knowledge.

Signature: \_\_\_\_\_ Date (yy/mm/dd): \_\_\_\_\_