



Membership Application

(Effective May 1st, 2009)

Native Canadian Centre of Toronto

16 Spadina Rd. Toronto, Ontario, M5R 2S7

(All information on this form will only be used confidentially and anonymously)



Date: _____

Name: _____

Address: _____

Postal Code: _____

Tel: _____ D.O.B _____

Email: _____

Would you like to receive Newsletter by Email? Yes or No

Please circle: M or F Native or non-Native

If you are Native, please complete:

What reserve and Nation(s) do you identify with:

Reserve (eg. Michipicoten F.N.) _____ Nation (eg. Ojibway) _____

Are you:

Status Indian Non-status Metis Inuit

Do you speak a Native language? If so, please identify which:

Type of Membership (Please Circle One)

- \$20.00 Individual** (18 and Over)
- \$25.00 Family** (2 Adults & Children under 18, fill in family section)
- \$ 5.00 Senior** (aged 55 +)
- \$10.00 Student** (must be full time and show I.D.)
- \$10.00 Single Parent** (1 Adult & Children under 18, fill in family section)
- \$30.00 American** (Residence in U.S.A.)
- \$50.00 International** (Residence outside Canada and U.S.A.)

Please make all cheques out to the Native Canadian Centre of Toronto.
If you have special circumstances, please contact the membership office to consult with staff at ext. 343 or 320.

FAMILY SECTION:

Children under 18:

1. Name: _____

Circle: M or F Native or Non-Native

Birthday: _____

2. Name: _____

Circle: M or F Native or Non-Native

Birthday: _____

3. Name: _____

Circle: M or F Native or Non-Native

Birthday: _____

4. Name: _____

Circle: M or F Native or Non-Native

Birthday: _____

Spouse Name: _____

Date of Birth: _____

Please circle: Native or Non-Native

If you are Native, please complete:

What reserve and Nation(s) do you identify with:

Reserve (eg. Michipicoten F.N.) _____ Nation (eg. Ojibway) _____

Are you:

Status Indian Non-status Metis Inuit

Do you speak a Native language? If so, please identify which:

FOR OFFICE USE:

Staff or Volunteer Receiving: _____

CC / Debit /Cash /Cheque _____

Receipt # _____

Membership Card Issued By: _____

Expiry Date: _____

Voting Rights (circle): yes or no

Spouse Voting Rights yes or no

Computer Entry by: _____

Date Entered: _____

Notes: