

New Membership Application

Native Canadian Centre of Toronto
16 Spadina Rd, Toronto, Ontario, M5R 2S7
(All information on this form will be kept confidential)

Name: _____

Address: _____ Apt Number: _____

City: _____ Postal Code: _____

Date of Birth: _____ Please select: M F

Email: _____ Newsletter by Email?: Yes No

Phone: _____ Please select: Indigenous Non-Indigenous

Family Section

Only applicable to Family and Single Parent membership

Spouse Name: _____ Please select: M F

Date of Birth: _____ Please select: Indigenous Non-Indigenous

Children under 18

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Type of Membership

- \$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 (full time)
- \$10.00** Single Parent (1 Adult & Children under 18, fill in family section)

