



Cowichan Valley
Performing Arts Foundation

MEMBERSHIP APPLICATION 2021

GENERAL INFORMATION	
LAST NAME:	FIRST NAME:
ADDRESS:	
CITY:	POSTAL CODE:
PHONE: (H)	PHONE: (C)
EMAIL ADDRESS:	
MEMBERSHIP INFORMATION (Please select membership opportunity)	
<input type="radio"/> Executive Member (\$75.00/year)	<input type="radio"/> General Member (\$50.00/year)
Membership fees can be paid via: <ul style="list-style-type: none">Email transfer to info@cvperformingarts.ca (note: please provide full name and either "Membership or Donation" in comment box for email transferor mail cheque/application to <u>CVPAF PO Box 366 Duncan, BC V9L 3X5</u>	
COMMITTEE INVOLVEMENT	
<input type="radio"/> Yes, I would be interested in helping with one of the committees <ul style="list-style-type: none"><input type="radio"/> Gala Committee<input type="radio"/> 50/50 Organizing Member<input type="radio"/> 50/50 Selling at year end shows<input type="radio"/> Music Instrument Library Co-ordinator<input type="radio"/> Grant Writer<input type="radio"/> Presenter for Funding (100 Women, 100 Men, City Presentations)	
<input type="radio"/> Not at this time	
<input type="radio"/> I am unable to join a committee but can help out in other ways (please specify):	
MEMBERSHIP AGREEMENT	
I, _____, hereby acknowledge that I have fully read the attached Code of Ethics Agreement and recognize that is intended to uphold the integrity of this Foundation and its members.	
MEMBER SIGNATURE: _____ DATE: _____	