



CSI Christ Church, Toronto



MEMBERSHIP FORM

APPLICANT INFORMATION

Primary applicant Name:

Current address:

Phone Res:

Phone Cell:

City:

State:

ZIP Code:

Email address:

FAMILY INFORMATION

Name:	Birthday (MM/DD)	Wedding Anniversary (MM/DD)	Relationship to Primary member	Age Above 18 Yrs	Voters List
				Yes / No	Yes / No

Signature of applicant:

Approved by Exec. Committee- Yes / No

Date: (mm/dd/yyyy)

Date: (mm/dd/yyyy)

Note: Please pay Yearly membership fee **\$ 100**. Per family along with this duly filled membership form

Each earning child **\$ 50** as Yearly membership fee

Single member Yearly membership fee is **\$ 50**

Members 18 years of age and above may please specify if they want to be voting members and willing to attend all General Body Meetings. Please mark **Yes** or **No** as per your choice in the Voters List column.

Please note that if a member prefers to stay as a voting member and fails to attend General Body meetings, it may affect the quorum requirements.