# Please use the ONLINE REGISTRATION at cfuwkw.org if possible rather than this form

**Membership Registration 2023-2024**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Last Name:** | | **First Name:** | | | | |
| **Renewing Members:** Complete items below **only if any information has changed** | | | | | | |
| Address: | | | | | | |
| City: | | | | Province: | | Postal Code: |
| Phone: (H) | (W) | | | (C) | | |
| Email: | | | | | | |
| **Colleges, Universities or Post-Secondary Institutions Attended** | | | | | | |
| Name of College or University | | | Degree | | Major/Discipline | |
| 1. | | |  | |  | |
| 2. | | |  | |  | |
| 3. | | |  | |  | |

Fees must be paid by September 30 for you to be listed in the hard-copy directory

**Membership Fees**

**MEMBERSHIP TYPE** *(Please check √ where applicable)* **COST**

* **Full** A graduate from an accredited university or a woman who supports the purposes of CFUW $ 120.00
* **Dual** Please specify the other CFUW club to which you are paying full dues $ 40.00
* **Student** Full-time University or College student $ 60.00

**CFUW K-W Charitable Fund Donation(s) *(tax receipt will be issued)***

|  |  |  |
| --- | --- | --- |
| * **Carolyn Haehnel/Mabel Dunham Fund** *(to achieve sustainability)* * **Edna Haviland Fund** *(to achieve sustainability)* * **CFUW K-W Charitable Fund** – Unrestricted |  | $  $  $ |
|  | **Total** | **$** |

Pay by e-transfer to [cfuwkwdeposit@gmail.com,](mailto:cfuwkwdeposit@gmail.com) or mail a cheque to the address below.

Make cheques payable to: **CFUW Kitchener-Waterloo**

***DON’T MISS OUR DRAWS***

***$50.00 Gift Certificate*** for Early Bird draw if you register before September 10

***$50.00 Gift Certificate*** for referring a friend who joins

**Membership Chair**

**P.O. Box 22039 Waterloo, ON N2L 6J7**

**Westmount P.O.**

**Membership Status and Interests**

* Renewing Member  New Member - How did you find us?
* Friend (name)  Newspaper  Internet
* Other

Please indicate if you have an **interest or experience** in any of the following areas of club need:

* Telephoning  Fundraising – Book Sale  Advocacy
* Hospitality  Web design (CMS)  Bookkeeping
* Social Media (Twitter, Facebook)  Membership  Marketing
* Event Planning  Newsletter editing  Resolutions and Legislation
* Graphic Design  Nominations Committee  Ontario Council Meetings

Other Skills:

**Membership Directory**

If your current photo is more than 5 years old or of poor quality, please consider doing a retake. Please mail or email (preferably) a high resolution photo (e.g. directly from your digital camera) to Susan Vecchiarelli, 526 Winterburg Walk, Waterloo, ON N2V 2S8; [msvecchiarelli@rogers.com.](mailto:msvecchiarelli@rogers.com)

The information collected on this form will be used by CFUW Kitchener-Waterloo to create a database of members.

This database will be used to publish a membership directory for the personal use of members, and may be analyzed for membership trends. It will not be sold, loaned, or provided in any way to any other individual or organization. Under the Freedom of Information and Protection of Privacy Act (FOIPP), permission is needed to print/post images or information about our CFUW members in our monthly newsletter and on the website. The directory is available in print and on the password-protected Members Area of our website and is only available to current members. It is not to be used for marketing purposes.

If you have any objections to your personal information or picture being included in our printed or electronic directory or on the password-protected Members Area of our website/ or any other club social media advertising please check this box. 

* I **DO NOT** need a printed directory this year  I **DO** need a printed directory this year

I certify that the information provided in this application is accurate and that I support the principles of CFUW K-W. I may attend interest group activities only when my membership fees are paid in full.

*Signature: Date:*