



2016 – 2017 Membership Application

Please be advised memberships run from May 1, 2016 to April 30, 2017

**SONSHINE SOCIETY OF CHRISTIAN COMMUNITY SERVICES
APPLICATION FORM**

Thank you for applying to become an active member of Sonshine Community Services. Members are those who support and endorse the work and goals of Sonshine, which are described in the objects and mission statement of Sonshine, and who adhere to Sonshine’s objects and bylaws.

The mission of Sonshine is: *Motivated by our Christian faith, our mission is to help women and children transform their lives.* Members may view a copy of Sonshine’s objects and bylaws at the Sonshine offices during regular business hours.

Annual Membership Fee:* **\$25/ member**

Name of Individual Member(s):	Signature of Individual Member(s):	Fee:
1) _____	_____	\$25
2) _____	_____	\$25
Total Annual Membership Fee:*		\$_____

Address: _____

City: _____ Province: _____ PC: _____

Telephone: _____

E-mail: _____

Method of Payment:

_____ Cheque (*enclosed, payable to Sonshine Community Services*)

_____ Credit Card: _____ Exp. _____
(Visa and MasterCard only)

Name on the Credit Card: _____

Dated: _____, 2016

If paying by credit card, you may fax your completed form to Sonshine Community Services: Attention: Nicole Francis Fax # (403) 287-2194

For further information required please call Nicole at (403) 243-2002

*Sonshine Community Services is a registered Canadian charitable organization (Registered Charity Business # 119156412RR0001), and will issue an official receipt for income tax purposes for tax-deductible donations made. Please be assured your information will be kept confidential.

THANK YOU FOR YOUR SUPPORT