SYNERGY COMMUNITY MEMBERSHIP REGISTRATION FORM

September 1 - August 31

OFFICE ADMIN ONLY **Registration Date:** _____ **Membership # :** _____

Name of Organization _____

Name of Contact Person _____

Address: _____ **City/Town:** _____

Postal Code: _____ **Phone:** _____ **Fax:** _____

Primary Email: _____ **Website** _____

Mailing Address: (if different) _____ **City/Town:** _____

Prov: _____ **Postal Code:** _____

Type of Organization/Business: _____

Not-for-Profit Organizations: **Incorporated?** **Yes** ☐ **No** ☐ **Charitable Status?** **Yes** ☐ **No** ☐

Number of Members and/or Employees: _____

Reason for Joining? _____

How did you hear about us? _____

Can we contact you with regard to Synergy programs/events/workshops/volunteer opportunities? **Yes** ☐ **No** ☐

What kind of training sessions or workshops would your organization be interested in attending? **Please list below.**

_____

_____

SECTION B: PAYMENT

Please Indicate Perferred Method of Payment: **Cash** ☐ **Cheque** ☐ **Credit Card** ☐

OFFICE ONLY

PMT REC. _____

PMT AMT. _____

If paying by **Cash** or **Cheque** - please deliver payment to the Centre for Community Leadership at 101, 340 Merganser Dr W. If paying by **Credit Card** - please call 403-212-0242 to provide Synergy Staff with card info.

A RECEIPT WILL BE FORWARDED TO YOU AT THE PRIMARY EMAIL ADDRESS LISTED ABOVE

Would you like us to contact you regarding future Synergy programming? ☐ YES ☐ NO Initial

By checking "YES" you consent to receiving email notifications from Synergy and their staff in the form of newsletters, email updates, volunteer requests, fundraising opportunities, donation requests, etc. You can unsubscribe from these notifications at any time by emailing "unsubscribe" to involved@yoursynergy.ca

COMMUNITY MEMBERSHIP BENEFITS

- **Complimentary** resource information, community development initiative coordination and volunteer development assistance for community organizations.
- **Automatic 25% off** all *extra charge, regularly priced programs, workshops and events (pre-subsidized programs and events are not eligible).
- **One vote** per membership at the SYNERGY Annual General Meeting.

MEMBERSHIP IS ACTIVE FROM SEPTEMBER 1 - AUGUST 31

SYNERGY

WWW.YOURSYNERGY.CA - INVOLVED@YOURSYNERGY.CA - 403-212-0242

This personal information is being collected for activities related to Synergy youth program registration. The personal information will only be used for the purpose(s) identified, and is collected and used in compliance with the Personal Information Privacy Act, Section 33(c). If you have any questions about this form or the collection or use of your information, you may contact SYNERGY at 403-212-0242.