

COMMUNITY LIVING-CENTRAL HURON
MEMBERSHIP APPLICATION

I would like to become a Member, annual cost of \$5.00. I support the Agency's policies, purposes and vision. Being a Member entitles me to receive a copy of the Agency's quarterly newsletter, information on upcoming events and activities, and be eligible to vote at the Annual General Meeting, as well as a copy of Community Living Ontario's newsletter. The Agency will provide your name and address to Community Living Ontario unless you advise otherwise by April 1st.

Please note, Memberships must be paid prior to the Date of Record in order to be eligible to vote at the Annual Meeting.

Date	Signature
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Name: _____

Address: _____

Postal Code: _____ Phone No. _____

Please return this form along with your fee to:

Community Living-Central Huron
P.O. Box 527
267 Suncoast Drive East,
Goderich, Ontario. N7A 4C7
(519) 524-7362.

Note: Membership Cards may be picked up at the Annual Dinner and Meeting.

“That people live in a state of dignity, share in all elements of living in the community and have the opportunity to participate effectively.”