

# **Green Ribbon Advocacy Society**

## **G.R.A.S. Membership Application Form**

**Note: A new form should be used for each new or renewing member.**

(Circle one) Mr. Mrs. Miss. Ms

Last Name: \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

### **Mailing address**

Street Name and Number \_\_\_\_\_ City/Town \_\_\_\_\_ Province/State \_\_\_\_\_ Postal/Zip \_\_\_\_\_

\_\_\_\_\_ Email Address \_\_\_\_\_ Date of Birth \_\_\_\_\_

\_\_\_\_\_ Day / \_\_\_\_\_ Month / \_\_\_\_\_ Year

**Membership** – please circle the length of membership you wish to purchase.

1 year - \$20.00                      2 year - \$40.00                      3 year - \$50.00

*\*please note membership fees are non refundable.*

**I would also like to make a contribution of: \$ \_\_\_\_\_**

Green Ribbon Advocacy Society Fund raiser committee will issue you an official membership card for your contribution. *\*(Details on our web page)*

**By attaching payment I certify that I meet the conditions of membership:**

- I am a tax paying citizen
- I actively support the founding principles of G.R.A.S.
- I am at least 18 years of age and actively vote.

**If paying for more than one membership with my credit card or cheque I certify that:**

- Each membership purchased with my cheque or credit card payment has been paid for with each of the new members and renewing members consent.

**Applicant signature: \_\_\_\_\_**

### **Payment Information**

\* Registered members are not allowed to accept membership fees or contributions.

I have made my cheque payable to **Green Ribbon Advocacy Society**

I am paying for this application with my credit card.

Please bill my credit card for: \$ \_\_\_\_\_

Type of credit card:                      Visa                      Master Card

Card number \_\_\_\_\_ Expiry date: \_\_\_\_\_

Card Holders Name: \_\_\_\_\_

Card holders signature: \_\_\_\_\_

*\*We consider your information private and confidential.*