



C.A.W.E.S.

Central Alberta Women's Emergency Shelter

Membership Application

POLICY STATEMENT: All individuals applying for membership to CAWES must complete the application form and submit it to the Executive Director who will review the application.

The application will then be presented at the monthly Board of Director's meeting for approval. Membership fee is \$20.00. If Membership is denied, the fee will be returned to the applicant.

Name:..... Phone:.....

Address:.....

City:..... Postal Code:.....

Email:.....

Method of Payment:

Cheque Enclosed

\$20.00 Membership Fee

Visa

\$_____ Donation

MasterCard

Other:

Amount:

Card Number:.....

Expiry Date:.....

Name on Card:.....

Authorized Signature:.....

Are You Interested in Becoming a Volunteer? Yes.....No.....

Signature.....

