## M<sup>2</sup> Meta Makers Cooperative Membership Form

First Name:					
Last Name:					
Address:					
City: Province: Postal Code:					
Email Address:					
Phone Number:   This is a mobile numb	er				
Age: 🔲 I am 18 years of age or older					
Method of Payment: Cheque Cash Interac e-transfer  Please send e-transfer payments to pay@metamakers.org					
Public Member Profile:					
The following profile information will be displayed on your public Member Profile.					
Tell us about yourself (a brief bio):					
Public Member Profile continued on next page.					

Public Member Profile:					
Tell us about special sk	tills you have that you car	n share with othe	ers:		
What new things would	d you like to learn?				
☐ Metalworking	Woodworking	Leatherw	orking		
☐ Cosplay	☐ Jewelry	☐ Electronic	cs Software		
☐ Welding	Glasswork	Pottery	☐ Painting		
CAD	CNC	☐ Podcastir	ng Audio Production		
3D Printing	☐ Video Production	ı			
Other interests not listed above:					
By submitting this membership form, I understand that my public Member Profile information will be on display in the Meta Makers location. Meta Makers does not share your information with third					
parties.  I have read and agree to abide by the SOPs					
I agree to receive electronic messages from Meta Makers and to the electronic message consent policy					
X		Date:			

Please complete payment and send this completed form to <a href="mailto:membership@metamakers.org">membership@metamakers.org</a> along with a headshot photo of yourself.