

CFUW/Saskatoon Membership Application Form 2015-16

Please send this form with your membership fees (\$80.00 for regular members, \$40.00 for students) to the Treasurer, CFUW/Saskatoon, P.O. Box 7405, Saskatoon, SK., S7K 4J3 **or** bring it with you to the CFUW Day or to the October General Meeting.

Information: Name, address, etc. as you wish it to appear in the Directory.

Last Name _____ Phone (home) _____
First Name _____ Phone (work) _____
Street/Mailing Address _____ Phone (cell) _____
City/Postal Code _____ E-mail _____
Education _____

Interest Groups/Club Activities: Check off those groups you might wish to join.

- | | |
|------------------------------|----------------------|
| 1. Adventures in Dining | 8. Issues and Action |
| 2. Art Appreciation | 9. Mystery Book Club |
| 3. Biography Book Club | 10. Opera Divas |
| 4. Cdn. Literature Book Club | 11. Piano Fridays |
| 5. Financial Literacy | 12. Travel |
| 6. Friendly Visits | 13. Theatre |
| 7. International Issues | 14. Wine Tasting |

****See CFUW/Saskatoon Privacy Policy on back of this sheet.**

Communication:

1. Your newsletter will be sent by e-mail unless you specific regular mail _____
2. Would you be willing to drive other members to meetings and/or deliver newsletters and posters? _____. If you need a ride, please indicate _____
3. Sometimes the Club gets information on local, national or international issues that need to be reviewed. Would you be willing to review/evaluate such information? If so, please list topics you would be willing to review _____

**CFUW/SASKATOON PRIVACY POLICY FOR “MEMBERS ONLY”
PUBLICATIONS**

“Members Only” publications include Membership Lists, Club Programs, Interest Group lists, etc. These will not be shared with the public at any time and will not be placed in the Saskatchewan Archives until after two years have passed. I consent to have my personal information (name, address, phone, e-mail, education) published in “Members Only” publications. This consent will apply to future membership renewals unless I notify the President of Membership Chair that this consent be withdrawn.

For Board members and conveners of an Interest Group:

I consent to have my name published on our CFUW website _____

I consent to have my e-mail and telephone number listed on the CFUW website_____.

Signature_____

Date_____