

NELSON ROAD KINGS
PO BOX 1130, NELSON, BC V1L 6H3

APPLICATION FOR MEMBERSHIP

Applicant's Name: Mr. _____ Mrs. _____ Ms. _____
Surname Given Names

Address: _____
Street/PO Box / RR# / Site # Community Prov Postal Code

Phone No. (Home) _____ (Business) _____

Fax No. _____

E Mail _____

Vehicle _____

I hereby certify to the correctness of all the particulars contained herein and make application for membership in and agree to abide by the Constitution and By-Laws of the Nelson Road Kings.

Applicant's Signature: _____ Date: _____

Proposer's Name: _____ Signature: _____
(print)

Seconder's Name: _____ Signature: _____
(print)

(Note: Proposer and Seconder must be Members of the Nelson Road Kings **BUT CANNOT BE** Members on the Board, Executive, or immediate family of the Applicant (ie. Parent, sibling, child, spouse/partner and spouse/ parent, sibling, child).

<u>APPLICANT FEE FOR</u>	<u>INITIATION FEE</u>	<u>ANNUAL MEMBER FEE</u>	<u>TOTAL FEE</u>
Regular Member	\$ 50.00	\$ 50.00	\$100.00
Associate Member	\$ 25.00	\$ 25.00	\$ 50.00
Spouse/Partner Member	NIL	\$ 25.00	\$ 25.00

Attach a cheque in the amount of the appropriate Total Fee and mail to the address noted above.
Your application will be reviewed and voted upon at the next meeting of the Executive.
For enquiries, telephone: 250-352-6843

Office Use

Application complete: Yes _____ No _____

Date considered by the Executive _____

Approved _____ Not Approved _____

Date Applicant advised of decision _____

ALL APPLICANTS MUST COMPLETE THIS APPLICATION IN ALL RESPECTS