



## HAMILTON-WENTWORTH CHAPTER OF NATIVE WOMEN INCORPORATED

### MEMBERSHIP FORM

Thank you for your inquiry regarding membership to the Hamilton-Wentworth Chapter of Native Women Incorporated. Our membership is as follows:

**FULL MEMBER:** An Aboriginal woman over the age of 18 years

**ASSOCIATE MEMBER** All others who are interested who do not meet the FULL MEMBER requirements. This includes men, organizations, youth, etc.

Members Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Alt. Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cost of Membership: \$5.00 for Full and Associate Member

Please send completed membership form along with membership fee to:

Native Women's Centre

Membership

1900 King Street East, PO Box 69036, Hamilton, Ontario L8K1W1

#### **FOR OFFICE USE ONLY:**

Date Received: \_\_\_\_\_

Membership Type:  FULL  ASSOCIATE

Added to Membership List By: \_\_\_\_\_

Membership Fee Paid:  Yes  No

Membership Expiry Date: \_\_\_\_\_