



**HAMILTON-WENTWORTH CHAPTER OF
NATIVE WOMEN INCORPORATED**

**MEMBERSHIP FORM
2023-2024**

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

FULL MEMBER:

An Indigenous woman over the age of 16 years or spouse of a man of Indigenous ancestry.

ASSOCIATE MEMBER:

All others who are interested who do not meet the FULL MEMBER requirements. This includes men, organizations, non-Indigenous women, youth, etc.

Members Name: _____

Membership Type: _____

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
1900 King St. E
PO Box 69036
Hamilton, ON, L8K 6R4

FOR OFFICE USE ONLY:

Date Received: _____

Membership Type: FULL ASSOCIATE

Added to Membership list by: _____

Membership Fee Paid: Yes No

Membership Expiry Date: _____