

OFFICE USE ONLY	
FORM	
CHQ / ET	
KEY'd	

To submit your application by email, please **download and save** the document under your name.

Fill in all sections, save the completed form, and email to: membership@cfuwetobicoke.ca

Printed applications, and cheques can be mailed to the Membership Chair at the address below.

Contact Information		(If handwritten, please use BLOCK letters.)																										
LAST NAME: _____		FIRST NAME(S): _____																										
Has your contact information changed? ☐ YES <i>Please complete this section.</i> ☐ NO <i>Please skip to the next section (DUES).</i>																												
ADDRESS: _____																												
CITY: _____	PROVINCE: _____	POSTAL CODE: _____																										
PRIMARY PHONE to appear in Roster: _____		EMAIL: _____																										
Membership Dues (please ☒ all that apply)																												
☐ REGULAR MEMBER or DUAL MEMBER with Etobicoke as primary club: \$116.00		TO SUBMIT YOUR APPLICATION: Mail to: Membership Chair CFUW Etobicoke 11 Shaver Ave. N. Toronto, Ontario M9B 4N5 -OR- Email to: membership@cfuwetobicoke.ca																										
☐ DUAL MEMBER - a member of more than one Club with Etobicoke NOT the primary club: \$34.50 <i>Other Club Name: _____</i>																												
☐ FULL-TIME POST-SECONDARY STUDENT: \$58.00 <i>School Name: _____</i>																												
MEMBERSHIP ROSTER <i>-Roster is available to view/print from website: FREE</i> ☐ Printed Roster delivered by post: \$3.00																												
☐ ADDITIONAL DONATION TO CHARITABLE TRUST <i>-over and above the \$12 Charitable Trust donation included in your dues.</i> <i>A tax receipt will be issued for amounts of \$25 or more.</i>																												
TOTAL AMOUNT DUE: \$ _____ <i>NOTE: Due by October 15, 2026 for inclusion in the 2026-27 Roster</i>		METHOD OF PAYMENT: (please ☒) ☐ Cheque Payable to CFUW Etobicoke Mail to Membership Chair (address above)																										
		☐ e-Transfer (Interac) Send to: treasurer@cfuwetobicoke.ca																										
		FOR OFFICE USE ONLY <table border="1"> <thead> <tr> <th>CHQ #/ET REF</th> <th>DATED</th> <th>AMOUNT</th> <th>BY MBR</th> <th>REPT #</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>		CHQ #/ET REF	DATED	AMOUNT	BY MBR	REPT #																				
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Photo Consent																												
I CONSENT to having my photo included in club communications that are emailed to members (such as the newsletter) and/or posted in the members only sections of the website . (Members who do not want their images published will be required to absent themselves from group photographs.) ☐ YES ☐ NO																												
Note: 1. CFUW Etobicoke will obtain your prior permission to use your photo in any publicly accessible social media platform, including but not limited to Facebook, Instagram, YouTube, NextDoor, and both print and digital news. 2. Unnamed images of members are included in our website banner. Please contact Communications if you would like your picture removed.																												

CFUW Etobicoke

RENEWING MEMBER APPLICATION 2026-2027 (CONTINUED)

Other Information				
Please provide updates, additions, and corrections only. (Check Roster for information currently on file.)				
Current Occupation(s): _____				
☐ Retired (please list former occupation(s)) _____				
Skills, Personal & Professional Interests: _____				
Post-Secondary Education and Training (completion is optional)				
COLLEGE /UNIVERSITY	CITY	DEGREE	YEAR	MAJOR / DISCIPLINE
Committee Involvement				
CFUW offers a breadth of activities, projects and events for our members to enjoy, to learn and to support others. <i>As a volunteer organization, our members are expected to contribute time and skills to keep our organization running. We offer many opportunities as members, chairs and/or co-chairs on our committees and the Executive Committee.</i> Please consider where best your skills and interests are suited and check the appropriate boxes below. Thank you!"				
Please indicate your areas of interest with a ☒ or type in here:				
☐ Advocacy & Issues	☐ Archives	☐ Charitable Trust	☐ Communications	☐ Diversity & Inclusion
☐ Finance	☐ Fundraising	☐ Hospitality	☐ Interest Group Convenor	☐ Marketing
☐ Membership	☐ Mentoring	☐ Nominating	☐ Programme	☐ Publicity
☐ Web Page	☐ Welcoming			
Executive Committee: Would you consider running for a CFUW Etobicoke Executive position? ☐ YES ☐ NO ☐ Vice-President (continues to President and Past President) ☐ Secretary ☐ Treasurer ☐ Membership Chair				
Ride Share: ☐ I can drive another member to a meeting. ☐ I would like a ride to a meeting.				
The information collected on this form will be used by CFUW Etobicoke to create a database of members. This database will be used to permit communication among members, to conduct club business including providing information to members, to prepare and publish an annual membership directory (Roster) and to maintain our club's website. Personal information shall not be used for any other purposes. For more information, please click hyperlink CFUW Privacy Policy or go to www.cfuwetobicoke.ca under About Us/Privacy Policy.				
By completing this form, I consent to the use of my personal information gathered here for the purposes listed above. I certify that the information provided in this application is accurate and that I support the principles and policies of CFUW, including the Respectful Treatment Policy at www.cfuwetobicoke.ca under About Us/Respectful Treatment Policy. I understand that I may attend interest group activities only when my 2026-27 membership dues are paid in full.				
SIGNATURE: _____ DATE: _____ Please sign if mailing. If submitted electronically, receipt of your emailed application replaces your signature.				