

Name(s): _____

Name(s): _____

Address: _____

Phone: _____ Postal Code: _____

Email: _____

I can volunteer for:

- | | |
|---|---|
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> General assistance |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Safety & Security |
| <input type="checkbox"/> Communications | <input type="checkbox"/> DR Recreation Facility |
| <input type="checkbox"/> Social | <input type="checkbox"/> Skating Rink maintenance |
| <input type="checkbox"/> Traffic | |

Payment:

2017/2018 DRCA Membership \$25.00 _____

Membership runs from September 1, 2017 to August 31, 2018

Make a cheque payable to "Discovery Ridge Community Association"

Mail to: **Discovery Ridge Community Association**
PO Box 75023
Westhills RPO
Calgary, AB T3H 3M1

Undersigned hereby consents to: (1) the collection of the personal information on this form; (2) the use of the information for the following purposes: to solicit volunteers for DRCA's programs and activities; to recruit members and solicit renewal of membership in DRCA; to solicit participation or membership in programs or activities provided by DRCA; to provide information to you on DRCA programs and activities; (3) disclosure of the information in the DRCA register of members which is available for review by various members of the public as required by law. The purpose of collection of the information is to provide contact and registration information for DRCA and to use in and disclose it as described above. The DRCA does not sell membership lists. Designated members of the board of the DCRA are able to answer questions about the collection of the information.

Date: _____ Signature: _____