

# LIPA PARK

P.O. Box 20322, St. Catharines, ON L2M 7W7

## MEMBERSHIP APPLICATION / RENEWAL

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Age:  18 - 39 Years  40 - 64 Years  65+ Years Slovenian Descent:  Yes  No

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Age:  18 - 39 Years  40 - 60 Years  65+ Years Slovenian Descent:  Yes  No

Maiden Name: \_\_\_\_\_

Children's Names:

1. \_\_\_\_\_ Date of Birth \_\_\_\_\_

2. \_\_\_\_\_ Date of Birth \_\_\_\_\_

3. \_\_\_\_\_ Date of Birth \_\_\_\_\_

4. \_\_\_\_\_ Date of Birth \_\_\_\_\_

5. \_\_\_\_\_ Date of Birth \_\_\_\_\_

6. \_\_\_\_\_ Date of Birth \_\_\_\_\_

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

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

Telephone: (home): \_\_\_\_\_ (cell): \_\_\_\_\_

Renewal Membership: ( ) \$ \_\_\_\_\_ Family Membership @\$40: ( ) \$ \_\_\_\_\_

New Membership: ( ) \$ \_\_\_\_\_ Single Membership @\$20: ( ) \$ \_\_\_\_\_

Hunter & Fisherman's Membership \$5 per person: ( ) \$ \_\_\_\_\_

Names: \_\_\_\_\_

If contacted, I/We would be prepared to volunteer some work at Lipa Park:  Yes  No

(Please make cheque payable to: S.N.D Lipa Park) \*Note: Children 18 years and older are considered ADULT MEMBERSHIP.