



Application for Society Membership or Society Membership Renewal

When you become a member of The Children's Aid Society of the City of Guelph and County of Wellington (operated as Family & Children's Services of Guelph and Wellington County), you are adding your support to the voices of others who share a commitment to the well-being of children and families in our community. Membership entitles you to vote* at The Annual General Meeting of the Society held in June each year.

A one-year membership (April 1st to March 31st) is \$5.00 per person.

Eligibility for Membership:

- 1) Must be either
 - a) an individual eighteen (18) years of age or over who resides or carries on business in the area served by the Society, or
 - b) a corporation which has its head office in or carries on business in the area served by the Society;
- 2) Notify the Secretary-Treasurer of the Society in writing of his/her desire to become a Regular Member;
- 3) Pay the annual membership dues;
- 4) Have a genuine interest in supporting the goals and objectives of the society; and
- 5) Is making the application in good faith.

A membership application to the Society is subject to the review and approval of the Governance Committee of the Society's Board of Directors.

To apply to become a member, or to renew your membership, please forward your completed application (attached) and cheque to:

Family & Children's Services of Guelph and Wellington County
Attn: Secretary/Treasurer, Board of Directors
P.O. Box 1088, Guelph, Ontario N1H 6N3

For further information call (519) 824-2410 ext. 4112.

** In order to vote at an Annual Meeting you must become a member at least 30 days prior to that Annual Meeting.*

Society Membership Application

Name: _____

Address: _____

Telephone: _____

E-mail: _____

Place of Employment: _____

Address of Employer: _____

I have read and support the Society's Mission, Vision, and Values: Yes No

I authorize the Society to conduct a child welfare record check: Yes No

Why do you wish to become a member of the Society?

How have you demonstrated this interest in the past?

How would you like to contribute to the organization?

How did you learn about Society membership?

Signature: _____

Please mail completed application along with \$5.00 cheque to:

*Family & Children's Services of Guelph and Wellington County
Attn: Secretary/Treasurer, Board of Directors
P.O. Box 1088, Guelph, Ontario N1H 6N3*