

Application for Membership to the Centre de recherche et d'action pour le bien-être environnemental (C.R.A.B.E.)

Name : ¹		
Organization :		
Phone :		
Fax :		
Email :		
Address :		
Type of membership :	Individual <input type="checkbox"/>	
	Organization <input type="checkbox"/>	
Availability :	Week <input type="checkbox"/>	Day <input type="checkbox"/>
		Evening <input type="checkbox"/>
	Weekend <input type="checkbox"/>	Day <input type="checkbox"/>
		Evening <input type="checkbox"/>
Specialty :		
Interests :		
Signature of member : ²		Date ___/___/___
Authorization by Council :		Date ___/___/___
Membership paid: Yes <input type="checkbox"/> No <input type="checkbox"/> Amount :		Date ___/___/___

¹ In the case of membership by an organization, the « NAME » is the person designated by the organization as having membership privileges

² In the case of a minor, the signature of an adult is required

³ Membership fees are \$5 for a minor, \$10 for an individual, \$50 for a small business or community organization, \$150 for a medium sized business and \$300 for a large business