



**Membership Application Form**

**Last name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_

Address: \_\_\_\_\_, City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal code: \_\_\_\_\_ Email Address: \_\_\_\_\_

Tel # \_\_\_\_\_ Bus. Tel # \_\_\_\_\_

***Contact Person if assistance is needed***

Name: \_\_\_\_\_ Tel: \_\_\_\_\_ email: \_\_\_\_\_

**I am:**

A Bliss user   
*Membership \$10.00*

Family/Friend of a Bliss user/alumni   
*Membership \$25.00*

Bliss Alumni   
*Membership \$10.00*

Friend of Bliss   
*Membership \$ 25.00*

**Questions for Applicants:**

How long have you been associated or known BCI or BCIC? \_\_\_\_\_

I would like to receive updates of BCIC activities by: email  regular mail

**I want to help the Bliss community by:**

Annual Donation \$ \_\_\_\_\_ Monthly Donation \$ \_\_\_\_\_ (*Instruction on website*)

Serving on a committee  Area of knowledge/interest \_\_\_\_\_

**Volunteering as:** Bliss Buddy  Helping a Bliss user  Helping with events

Other: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only:**

BCIC Membership Person: \_\_\_\_\_ Date: \_\_\_\_\_

Amount: \$ \_\_\_\_\_ Cash  Cheque No: \_\_\_\_\_ Bank: \_\_\_\_\_

Signature \_\_\_\_\_ Membership #: \_\_\_\_\_