



PROBUS CLUB OF CAMBRIDGE RIVERSIDE

PROBUS MEMBER RENEWAL FORM 2020-2021

Please print:

NAME: _____

DATE: _____

Please indicate if you will be 90 years of age by September 1, 2020 by ticking box.

PLEASE FILL OUT THE FOLLOWING
WE NEED YOUR INFORMATION EVERY YEAR

ADDRESS:

(Unit & Street) (City) (Postal Code)

Phone #: (____) _____ Email Address: _____
(PRINT)

• EMERGENCY CONTACT _____ Phone #: (____) _____ / _____
(name)

PLEASE ENSURE THAT YOU HAVE AN EMERGENCY CONTACT NAME AND NUMBER WITH YOU AT ALL TIMES.

• In what capacity could you help within our club? _____

• Please choose how you wish to receive your newsletter:

___ #1 – By email

___ #2 – Pick up your personal copy at the next meeting.

___ #3 – Send (or supply) 10 stamped self-addressed envelopes to: →

Cathy Rose
32 – 20 Isherwood Ave
Cambridge ON N1R 8P9

Methods of payment (payment to be received no later than June 30, 2020):

Cheque sent by mail to Anne Cher. Cheque dated no later than June 30, 2020

Cheque dropped off in Anne’s mailbox. Cheque dated no later than June 30, 2020

E-transfer to the Club: camrivprob@gmail.com. Complete this form or the fillable one on the website & mail to Anne.

I consent to the use of my personal information gathered here for use exclusively by the WOMEN’S PROBUS CLUB OF CAMBRIDGE RIVERSIDE. I consent to the publication of my image (if photographed) in the Club newsletter.

Signed: _____

Dated: _____

Mail this form, accompanied by a cheque for \$75
or e-Transfer the funds and email or mail this form as per above, to Anne Cher
Cheque payable to PROBUS CAMBRIDGE RIVERSIDE
CHEQUE MAY BE POSTDATED FOR June 30, 2020.

Or mail form and cheque to: **Anne Cher**, 583 Champlain Blvd., Cambridge ON N1R 7V2

Anne’s email for emailing form anne.cherwonogrodzky@gmail.com

**This form & cheque must be received by the Membership Chair on or before
June 30, 2020 OR your Membership will be deemed cancelled.**

For Membership Chair use only: payment received receipt # _____ issued Date _____