



## FRIENDS OF ROSELAWN CENTRE MEMBERSHIP FORM

Membership is January to December

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_

E-MAIL \_\_\_\_\_

Please indicate the number of memberships desired:

Adult \$15 ___ Student Free ___ Couples \$25 ___ Family(3+)\$30 ___
Life Membership \$100 ___

Would you like to volunteer? \_\_\_\_\_

What area would you like to help? \_\_\_\_\_  
(set up for events-events-gardens-promotions-other)

Paid by Cash \_\_\_ Cheque \_\_\_ Paypal \_\_\_ E-transfer \_\_\_  
Total Amount \$ \_\_\_\_\_

Newsletter Email \_\_\_ Mail \_\_\_

Permission to list name in printed membership list Yes \_\_\_ No \_\_\_

SIGNATURE \_\_\_\_\_

DATE: \_\_\_\_\_

This membership can be mailed to Friends of Roselawn Centre, P.O. Box 281,  
Port Colborne L3K 5W1.

Please make your cheques payable to The Friends of Roselawn Centre

Or E-transfer to [friendsofroselawn@gmail.com](mailto:friendsofroselawn@gmail.com)

Or Paypal at our website : <http://friendsofroselawncentre.org/become-a-member>