

CAAW+S MEMBERSHIP FORM

NAME _____

AFFILIATION _____

ADDRESS _____

POSTAL CODE _____

TELEPHONE: _____

INTERESTS/CONCERNS _____

AREAS I'M INTERESTED IN GETTING INVOLVED:

- Newsletter Production: _____
- Membership Development: _____
- AGM/Conference Organization: _____
- Local CAAW+S Chapter Development: _____
- Other: _____

I HEARD ABOUT CAAW+S FROM:

- Friend _____ Companion/Spouse _____
- Colleague/Co-worker _____
- CAAW+S Regional Rep. _____
- I was mailed a newsletter/membership kit _____
- Other _____

Membership Fees:

\$5 per year unwaged, \$15 per year waged, \$30 per year group.

Please make cheque or money order payable to:

**The Canadian Association for the
Advancement of Women and Sport
323 Chapel St.
Ottawa, Ontario K1N 7Z2
(613) 233-5204**