



The West Island Black Community Association

48C, 4th. Avenue South, Roxboro, Quebec, H8Y 2M2

Tel: (514) 683-3925 Fax:(514) 683-7649 Email: admin@wibca.org Website: www.wibca.org

Membership Application Form

Surname: _____ Given name: _____

Address: _____
Number Street

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Cell: _____

E-Mail: _____

If you wish to receive emails, which will include upcoming meetings and event updates. Please initial here _____.

Date of Birth: _____ Age: _____

- 18 years and under.
 19 to 64 years.
 65 years and over.

Annual Membership Fees:

- Adult \$ 30.00
 Student/Senior \$ 20.00
 Family Membership \$ 70.00

Method of Payment: Cash: _____ Cheque#: _____

I am interested in assisting with the following committees

- Education Committee
 Finance Committee
 Membership Committee
 Cultural & Social Committee
 Youth / Mentoring Committee
 Seniors Committee
 Other, Please specify _____

Signature _____ Date: _____/_____/_____

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Thank you for your understanding and cooperation!