



Date: Group Membership Annual Fee: \$60.00
Group Name:
Mailing Address: Phone:
Executive: Secretary:
President: Name:
Name: Address:
Address: Postal Code:
Postal Code: Phone:
Phone: email:
email: Treasurer Rep to CAC
Name: Name:
Address: Address:
Postal Code: Postal Code:
Phone: Phone:
email: email:
Date of Monthly Meetings:
AGM:
Location of Meetings:
Is your group registered under the Society's Act? Y N
Society Act #:
Is your group a registered Charity? Y N
Registration #:
Number of Members:
Membership Fee:

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