



Calgary Colts Alumni Association



APPLICATION FOR MEMBERSHIP

Renew Membership **New Member** **I am a Calgary Colts Alumni**

Previous Membership Number _____ Years with Program ex. 2003-2005_____

PERSONAL INFORMATION

Name: _____ Mr. Mrs. Ms.

Date of birth: _____ Phone: _____

Current address: _____

City: _____ AB: Other: _____ Postal Code: _____

BUSINESS INFORMATION

Current employer: _____

Employer address: _____ Position: _____

Phone: _____ E-mail: _____ Fax: _____

City: _____ Province: _____ Postal Code: _____

GETTING INVOLVED

As a member of the alumni association I would like to participate in the following areas?

ANNUAL MEMBERSHIP DUES

Amount: \$50.00 Cash: Cheque: PayPal: Jacket Size - _____ Shirt Size- _____

**Please note that payment MUST be made at the time of application. Please make cheques payable to:
Calgary Colts Alumni Association - PPO 75039, RPO Westhills, Calgary, AB. T3H 3M1**

CONDITIONS

1.1 Members: Members shall be limited to persons, firms, corporations, organizations and other groups interested in furthering the objects of the Association and shall consist of anyone whose application for admission as a Member has received the approval of the Board of Directors of the Association. **1.2** Voting Rights: Each Member shall be entitled to exercise one (1) vote at meetings of Members. **1.3** Membership Fees: The membership fees or dues shall be determined by the Board of Directors from time to time. **1.4** Withdrawal of Membership: Any Member may withdraw from the Association by delivering to the Association a written resignation. **1.5** Removal of Member: Any Member may be removed by a vote of two-thirds (2/3) of the Members at an Annual or General Meeting provided that any such Member shall be granted an opportunity to be heard at such meeting.

AGREEMENT TO CONDITIONS

To the best of my knowledge, the answers given on this application are true. If membership is granted, I agree to abide by the Code of Ethics of the Association, and its Bylaws and Business Plan. I Agree: Date: _____

APPROVED BY THE BOARD

Signature of Director: _____ Date: _____

Signature of Director: _____ Date: _____

CONFIRMATION OF PAYMENT RECEIVED (OFFICE USE ONLY)

Amount Received: \$50.00 Received by: _____ Date: _____