



## BPW Niagara Falls Membership Application

*Applying for a Corporate Membership? Please request the Corporate Membership Application; this application is for individual memberships.*

I hereby apply for membership in **BPW Niagara Falls** and agree to comply with the By-Laws of the Club. (By-Laws can be obtained from the Membership Chair.)

**\*Application Date:** \_\_\_\_\_

**\*Name:** \_\_\_\_\_

**Address: (Street, City, Postal Code)** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Business Phone:** \_\_\_\_\_

**\*E-Mail:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**\*Occupation:** \_\_\_\_\_

**\*Company and Position:** \_\_\_\_\_

**How Did You Learn About BPW?** Check all that apply.

BPW Web Site Please specify:	<input type="checkbox"/> Local <input type="checkbox"/> Ontario <input type="checkbox"/> Canada <input type="checkbox"/> USA
BPW <b>Club Name</b> Social Media: Please specify:	<input type="checkbox"/> Facebook <input type="checkbox"/> Twitter <input type="checkbox"/> Instagram
Member: Fill in Member's Name:	_____
BPW Event: Please specify:	_____
Other: Please specify:	_____

### **BPW Niagara Falls' year starts May 1 and ends April 30**

Please tick payment method and all other boxes that apply

**Payment Method:**  **E-Transfer bpwniagarafalls@gmail.com**  **Cheque in CAD Payable to "BPW Niagara Falls"**

**Joining between May 1 – Dec 31:** I enclose payment for current year's membership of \$175.00 CAD. Membership renewal will be May 1 of the *following* year.

**Student: Joining between May 1 – Dec 31:** ask about Special Rate. Membership renewal will be May 1 of the *following* year. *To qualify for the student rate you must be enrolled in at least 60% of full time study in a post secondary educational institution.*

**Joining between Jan 1 – April 30:** Contact BPW Niagara Falls Treasurer.

I am a Young BPW Member (35 years old or younger).

**E-Transfer payment method:** Please email completed application to bpwniagarafalls@gmail.com.

**Cheque payment method:** Please submit completed application & cheque, payable to **BPW Niagara Falls**, to: Nancy Broerse, BPW Niagara Falls Treasurer, contact bpwniagarafalls@gmail.com for mailing address.

I hereby give consent for BPW Niagara Falls to use my personal information on this application and/or use and distribute my image or voice in photographs or video for the sole purpose of providing benefits of membership (*i.e. Newsletters, Annual Reports, Web Site, Social Media as appropriate*) within the different levels of the BPW organization (*BPW Niagara Falls, BPW Ontario, BPW Canada, BPW International*). I further, agree to protect members' personal information from distribution, publication or any commercial use whatsoever.

I hereby give consent for my personal information to be distributed to other members on the BPW Niagara Falls and city membership roster as described immediately above.

I hereby give consent for BPW Niagara Falls to email communications to me. This confirms your subscription and grants BPW Niagara Falls permission to email you. You can revoke permission to email to your email address and any time by using the Unsubscribe information found at the bottom of every email.

Signature  
and Date:

\_\_\_\_\_

Questions? Please contact bpwniagarafalls@gmail.com

Approved by the Executive Board of BPW Ontario and BPW Niagara Falls, Canada