

MBPW Niagara Falls Membership Form

I hereby request membership in BPW Niagara Falls and agree to comply with the bylaws of the Club (Bylaws can be obtained from the Membership Chair).

Date:	
Name: Address: (Street, City, Postal Code)	
Home Phone:	Business Phone:
E-Mail:	Cell Phone:
Occupation:	
Company and Position:	
BPW Niag	<u>ara Falls fiscal year starts May 1 and ends April 30.</u>
Please tick payment method and all oth	er boxes that apply
Payment Method: Cheque Payable 1	to "BPW Niagara Falls"
□ I enclose payment for current year'	s fee of <mark>\$175.00</mark>
□ I am a Young BPW Member (35 or	younger)
Cheque payment method : Please su BPW Niagara Falls Treasurer, PO Boy	ubmit completed form & cheque, payable to BPW <mark>Niagara Falls</mark> to: <mark>Nancy Broerse</mark>, < 18, Virgil, ON_L0S 1T0
voice in photographs or videos for the s Social Media as appropriate) within the	gara Falls to use my personal information on this application and/or use and distribute my image or sole purpose of providing benefits of membership <i>(i.e. Newsletters, Annual Reports, Website,</i> e different levels of the BPW organization <i>(BPW <mark>Niagara Falls</mark>, BPW Ontario, BPW Canada, BPW</i> members' personal information from distribution, publication or from any commercial use
I hereby give consent for my persor immediately above.	al information to be distributed to other members on the membership roster as described
Niagara Falls permission to email you.	gara Falls to email communications to me. This confirms your subscription and grants BPW You can revoke permission to email to your email address and any time by using the Safe f every email sent either from our club inbox or from Mailchimp, or by responding with he email response.
Signature & Date:	