

CALGARY ITALIAN CULTURAL CENTRE

MEMBERSHIP FORM

FIRST NAME _____ SPOUSE\PARTNER _____

LAST NAME _____

ADDRESS: _____

POSTAL CODE: _____

TELEPHONE: Res: _____ Bus: _____

EMAIL ADDRESS: _____

DATE OF BIRTH: Day: _____ Month: _____ Year: _____

OCCUPATION: _____

TYPE OF MEMBERSHIP:

Full Member: _____ \$80.00 + 4.00 G.S.T. = \$84.00

Student: _____ \$10.00 + 0.50 G.S.T. = \$10.50

G.S.T. APPLIES TO ALL FEES

Our dues cover January to December of each Calendar Year. Please complete the form and mail, email to the Calgary Italian Cultural Centre.

Email: info@calgaryitalianculturalcentre.com Web: www.calgaryitalianculturalcentre.com

*Please note no information will be released to any other business, etc. Your information will be used strictly for the mailing out of the newsletter, announcements and updates on CICC events.