



MEMBERSHIP APPLICATION

DATE: _____

Name(s): _____

Business (if applicable): _____

Street Address: _____

Postal Code: V9P _____ Telephone (_____) _____

E-Mail(s): _____

E-Mail(s): _____

☐ By checking this box, I/we acknowledge that The FCA collects and maintains only the above personal information relating to its members. This information is confidential and is used for the purposes of contacting members concerning FCA business including notices of meetings, newsletters and other communications. Members' information is available only to Directors of the Association and the Membership Committee, is maintained privately and is never shared with third parties.

Please mark your payment choice:

1 Year Term \$25.00 ☐

3 Year Term \$60.00 ☐

eTransfer:

eTransfer your payment to treasurer@fairwindscommunityassociation.org.

Please include your name and address in the e-transfer form.

Via Mail:

Complete this form and mail it to us with your cheque.

Our address is Fairwinds Community Association, PO Box 281, Nanoose Bay, BC V9P 9J9

(Please do NOT drop off forms or payments at any other Fairwinds' locations for delivery to FCA)