



# Member Registry Form

**I would like to be a/an:**

- Youth Member (under 25) — FREE
- Individual Member — \$35
- Senior Member (55+) — \$30
- Not-for-Profit/Organization Member — \$60
- Corporate Member — \$200

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

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Province:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Please check all that apply. I give consent to Scarborough Arts:**

- To add me to the following Scarborough Arts mailing list/s:
  - General Mailing List (1-2 emails per month)
  - Media Releases (1-2 emails per month)
  - Volunteer Opportunities (1 email per month)
- To give my contact to the public about my services.\*
- To list my information on [www.scarborougharts.com](http://www.scarborougharts.com)

**Website (Optional):** \_\_\_\_\_

**Describe your work or activities.** (Optional. 20 words maximum.)

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*\*Scarborough Arts will not share, lend, or otherwise disclose any personal information about members or supporters to any outside parties unless authorized.*

**FOR OFFICE USE ONLY**

**Membership Start Date:** \_\_\_\_\_ **Membership Expiry Date:** \_\_\_\_\_

**Payment by:**  VISA  MasterCard  Cash  Cheque  PayPal