

MEMBERSHIP REGISTRATION



00River Grove Seniors Friendship Club



Activities Location: River Grove Community Centre, 5800 River Grove Avenue
Mississauga ON Phone: (905) 615-3444 ext. 2319
Mailing Address: River Grove Seniors Friendship Club, Suite 327, Creditview
Road Mississauga ON L5V 0B1

New Members must be at least 55 years old with valid id name, address, and birth date

Membership Term: September 01 to August 31 **Membership #** _____

Please Check One **Renewal** _____ **Old Membership #** _____
New Member _____

PLEASE PRINT CLEARLY

Last Name _____ First Name _____

Address: _____ APT # _____

City: _____ Postal Code _____

Telephone: _____ Age: _____ Birth Date _____

Email Address (Please Print Cleary) _____

1. I accept responsibility for my own medical coverage. I give permission for staff and volunteers with the City of Mississauga to arrange for any emergency medical care including hospitalization and transportation if necessary, and cover all cost that may be incurred. I agree to release and indemnify and save harmless the City of Mississauga, from all claims arising from participation in any programs, activity, or trip organized by the staff and/or volunteers at River Grove Community Centre by any cause whatsoever.
2. I have read and understood the Code of Conduct, as is written in the by-laws of River Grove Seniors Friendship Club.
3. I give permission for my picture to be used on the River Grove Seniors website. Y/N (circle one)
4. I agree to inform the River Grove Seniors Friendship Club of any change of address, phone number or email address.

Signature: _____ Date: _____

Name of Activity & Leader receiving Application and fee _____

Non Refundable Annual Membership Fee - \$10

PAID:\$ _____

NOTE: A fee of \$1.00 / \$3.00 will be charged each time a member attends the club dependent on activity.
Please see the Activity Schedule for details.