

# Membership Application

## Please Indicate Your Membership Choice

Individual Membership \$15.00       Family Membership \$25.00       Corporate Membership \$100.00

Family membership may include a maximum of five people living in one home and may include one person supported by Epic Opportunities who lives at a different address Please list family members below.

1. \_\_\_\_\_ 4. \_\_\_\_\_

2. \_\_\_\_\_ 5. \_\_\_\_\_

3. \_\_\_\_\_ *Please make cheques payable to Epic Opportunities*

## Would you like us to e-mail you our newsletter and information about our events and activities?

Yes       No       Please send me a paper copy in the mail.

## Optional Donation

**I wish to support Epic Opportunities by becoming a Sponsor, Benefactor or Patron.**

Sponsor: \$10.00 - \$49.00       Benefactor: \$50.00 - \$99.00       Patron: \$100.00+

We would like to acknowledge our donors on our website and in our newsletter. Please indicate if you prefer not to be acknowledged.  Please DO NOT name me as a donor on the website or newsletter

*Please make cheques payable to Epic Opportunities. Charitable receipts will be issued for all donations over \$10.*

## Member Information

First Time Member

Renewing my membership

### Connection to Epic Opportunities:

General Supporter

Supported by Epic Opportunities

Parent

Relative

Volunteer

Board Member

Name: \_\_\_\_\_ (person named will receive official tax receipt)

Street: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Declaration of Support :** I \_\_\_\_\_ agree with Epic Opportunities' mission and by-laws and promise to support the ongoing work of the organization. Epic Opportunities reserves the right to cancel individual, family or corporate memberships if this agreement is not upheld.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

-----  
I, \_\_\_\_\_ (please print) agree to allow Epic Opportunities to use my personal information for the following purposes:

- For contact regarding new developments (meetings, newsletter, bulletins, etc.)
- To maintain a membership list
- To provide charitable receipts as applicable

I acknowledge that I may withdraw my consent for the aforementioned conditions at any time by advising Epic Opportunities. in writing.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_