



APPLICATION FOR MEMBERSHIP

Please print or fill digitally:

*FAMILY NAME: _____ *FIRST NAME: _____

*ADDRESS _____ Apt. _____

*CITY _____ *POSTAL CODE _____

*E MAIL ADDRESS: _____

*PHONE: HOME _____ or *CELL _____

*MANDATORY INFORMATION

I acknowledge that I meet the requirements to renew my membership in the Burnaby Citizens Association (BCA) as specified below:

- I live in Burnaby;
- I am a permanent resident or citizen of Canada;
- I am a member in good standing with the BC NDP, and have included a copy of my membership receipt or other proof of membership;
- I am not a member or supporter of an opposing municipal party or independent candidate;
- I am including my membership fee with this completed form, or, I will make a donation online, and
- I am including a legible photocopy of identification that confirms my name and address and includes my signature (one piece of ID that confirms my name, address and signature or two pieces of ID with one that includes my name and signature and the other with my name and current address).

I am paying by **personal cheque** ____ or **credit card** ____ (Payment may not be made with cash)

To pay by credit card, visit <http://www.burnaby-citizens.ca>

Please direct my membership fees to the **Mayor & Council** ____ OR **School Board Trustee** ____ account.

Date of Application for Membership

Signature

Burnaby Citizens Association, P.O. Box 54559, 7155 Kingsway, Burnaby, B.C. V5E 4J6