VICTORIA HANDWEAVERS & SPINNERS GUILD

Membership Form / Privacy Act Permission Release Form

This form must be completed annually.

Name _____Date_____

Address _____

FULL STREET ADDRESS **CITY** **POSTAL CODE**

Phone Number _____Email Address _____

Membership type applied for:

☐ New/Renewal Member $25/year ☐ Associate $12.50/year

☐ Student (age 12-18) $12.50 ☐ Half Year $12.50 (join after Mar1)

☐ Two-for-one (same address) $37.50/year

Please make cheque payable to: ***Victoria Handweavers' and Spinners' Guild***

In order to comply with the Information and Privacy Act, it is necessary for each Guild member to give written permission to be included in the membership list and to also give permission to reproduce pictures of said member photographed at workshops, fairs, meetings, etc.

Please print your name and sign both scenarios to give consent:

I _____ hereby give consent to have my name, address, phone number and email added to the VHWSG membership list, available to Guild members only.

Signature _____ Date_____

I _____ hereby give consent to allow the VHWSG to print any photograph of myself attending a meeting, fair, workshop, etc., in the Guild newsletter and/or on the Guild website.

Signature _____ Date_____

Please send form and cheque (if applicable) to:

Membership
Victoria Handweavers & Spinners Guild
University Heights RPO Box 31125
Victoria BC V8N 6J3

Office use only:

__ Cash __ Cheque
__ Handbook
__ Membership Card
__ Receipt