

108 Community Association – Membership Application

All residents (owner or tenant) of the 108 Mile Ranch and areas that are part of the taxation boundaries, are eligible for membership in the Community Association. Membership allows you to participate in the decisions that are made for the Community Hall on behalf of the residents which includes AGM, budgets, and election of directors. The larger the membership – the more representative of the community the decisions will be.

Individual Membership Fees are \$10.00 annually (calendar year) and can be paid by etransfer (rca672329@gmail.com) or cheque. During membership drives – SQUARE will be available for debit payments.

Name: _____ Phone Number: _____

Physical Address (verification of residency or ownership): _____

PERSONAL INFORMATION AND PRIVACY ACT - The 108 Community Association is in the process of developing a Privacy Policy but acknowledges that all individuals have the right to know how their personal information will be utilized by both the Association and another member. The Association uses your personal information to provide you with dates of official meetings, including the AGM and Extraordinary General Meetings. If you have an email address – we also use that to inform the community of upcoming events, requests for volunteers, and sharing of information that may impact the community. When using emails, the Association ensures that all addresses are protected in a Blind CC (bcc) so that your information cannot be accessed or shared by others without your permission.

Members should advise how, if a formal request has been made to the Association Board, they can be contacted by another member of the association or a third party. This can be an email, phone number, your mailing address. You are only required to choose one method but can choose all.

By completing the following section, I am informing the Association of how other members can contact me for the purposes as laid out in the BC Societies Act.

☐ Phone - _____ ☐ Email: _____
☐ Mailing Address (PO Box) _____

By signing this application, I acknowledge that my information will be utilized by the Association for the purposes of information sharing unless contacted directly for permission to use for another purpose.

Signature – Membership Applicant

Date

OFFICE USE:

Residency Verified by: _____ Date Payment Received: _____

____ Driver's License
____ Utility Bill
____ Property Tax or Assessment

Payment Type:
____ Etransfer ____ Cash ____ Debit ____ Cheque