



**Tansi Friendship Centre Society**  
 Box 418  
 Chetwynd, BC V0C 1J0  
 Phone (250) 788-2996 Fax (250) 788-2353  
[reception@tansifcs.com](mailto:reception@tansifcs.com)

### MEMBERSHIP APPLICATION FORM

	Name	Age	M/F	Status (Metis/FN/ Non-Indigenous/Other)
<b>Applicant</b>				
<b>Spouse</b>				
<b>Child</b>				
<b>Child</b>				
<b>Child</b>				

**Physical Address:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Are you willing to volunteer? Yes:** \_\_\_\_\_ **No:** \_\_\_\_\_

I give my permission for my son/daughter's \_\_\_\_\_ photos or photos of myself \_\_\_\_\_ to be taken at any of the programs operated by the Tansi Friendship Centre Society. I understand these photos may be used for promotional purposes only, to advertise our programs and our Centre.

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

OFFICE USE ONLY

Expiration Date: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

Staff Initial \_\_\_\_\_