

PLEASE PRINT CLEARLY

Name (First & Last):	Member Number:
Street Address:	City & Postal Code:
Cell Phone #:	Email:
Have you previously volunteered on a Committee at the North Shore Winter Club? YES NO If yes, which Committee?	
1. Which Committee do you wish to join?	
2. Please comment below on why you wish to join this Committee?	
By signing and submitting this application, I acknowledge this information is true and correct.	
Signature of Applicant	Date

Please send your completed form to <u>volunteer@nswc.ca</u>. The Committee Chair will then follow up with you within a two week period. Thank you for your interest!