

Ryder Lake Farmers' Institute

Membership Form

Name: _____
First name Last name

Address: _____

City Postal code

Phone: (604) _____ **Cell Phone:** _____

E-mail : _____

Membership is \$10 per adult per year. new _____ renewal _____

Cash: _____ **Cheque no.** _____ (made payable to Ryder Lake Farmers' Institute.
Bring to a meeting or mail to: Laurie Hirschman, 48185 Ryder Lake Road, Chilliwack, B.C. V4Z 1E3)

E-Transfer _____ to RyderLakeFITreasurer@gmail.com

- I consent to the collection of my contact information by the RLFI for the purpose of notifying me of club activities and organizing volunteers.
- I consent to receiving emails from the RLFI with regard to membership, meeting notices and club events and business.

Signature: Date:

Additional Family members:

Name: _____
First name Last name

E-mail (if separate notices required) : _____

Signature: Date:

Name: _____
First name Last name

E-mail (if separate notices required) : _____

Signature: Date: