

## St Nicholas Catholic Women's League Membership Registration & Renewal Form 2024

Name:		CWL member #: (if applicable)			
Addres	55:	Home Tel #:			
		Cell #:			
City:	Postal Code:	Email:			
How do you prefer being contacted?		Marital Status:			
Email:	Home tel: Cell: Email & cell:	Month of Birth:			
Memb	ership Status: New: 🗌 Active: 🗌 Transfer: 🗌		Years of Service (if applicable):		
What age group do you belong to? 16 – 24: 25 - 34: 35 - 50: 51 - 70: 71+:					
Are you able to/or interested in assisting with: Baking for events: Pro-life initiatives/events/projects:					
Prayer support: Faith formation/Spiritual development: Producing handcrafts:					
Social Justice issues: D Physical help setting up meetings & events when available: D Fund raising projects: D					
Domestic Abuse Services (help with thrift store in Langley: Serving at funerals &/or other events:					
What gifts, skills, talents & interests do you have that you could share with us?					
Are you planning to attend CWL meetings? Yes No					
Do you need transport to attend meetings / CWL events? Yes No					
How will you pay your \$45 membership fee for the year?					
Cash : Cheque: (Make cheque payable to St Nicholas CWL)					
E Transfer (bank fees may apply) : stnicholascwl4041@gmail.com We are set up for AUTODEPOSIT.					
Consent: Please check all applicable:					
I consent that my personal information may be collected to maintain an accurate membership database.					
	I consent that my personal details can be shared with CWL members assigned to notify me of CWL activities, CWL communication, CWL events and requests from members for CWL volunteering opportunities.				
	I consent to have photographs of me taken during CWL events to be posted in CWL publications and/or posted on apostolic notice boards.				
	I do not wish for any of my personal details to be shared for any CWL purposes.				
	I do not wish to have photographs of me posted anywhere.				
Date:			Submit		