

## SOCIETY MEMBERSHIP APPLICATION FORM

## Are you a Society Member?

	•	Are you a Socie	ety Member:	
Help us as we continue sup tools to help them chang directly assisting the Ab	porting our clients se and redirect their potsford Police and	with timely inter r lives towards a d our fair city in r	ventions at criti healthy and pro- naking Abbotsfo	abership or become a society member today. Ical points, providing pro-active and positive ductive future. With your support, we are ford the "Safest City in BC". To become a w and mail back to us with your payment.
☐ I am a new n	nember (\$15.00)		I would like to	renew my membership (\$15.00)
organization  I am not a current  I am not an immed  As a society member of Ab  following:	ge or older Citizen in the City of Abbo ARJAA employee liate family membe botsford Restorati ership fee: \$15.00 ution and comply association shall i	otsford or represe er (Spouse, Paren ve Justice & Adv per year due on o with the Bylaws a not be transferral ing privileges as p	nt a municipal, t, Sibling or Chi ocacy Associati or before 16 day nd Membership ole oer the constitut	provincial, or national government and/or ild) of a current ARJAA employee on (ARJAA) I understand and agree to the ys prior to ARJAA's AGM (June 3 <sup>rd</sup> , 2013) Policy of ARJAA
I would like to help suppo	rt ARJAA throug	gh a tax deductik	ole donation of	:
□ \$50 □ \$100	□ \$250	□ \$500	□ \$1,000	□ \$
☐ \$500 Adopt-A-Case Spe	Onsor (see www.arjac	a.org for details)		
Method of Payment:				
☐Cheque (enclosed) Plea		ash (enclosed) ble to <i>Abbotsford Res</i>		nline ( $\underline{\text{www.arjaa.org}} \rightarrow \text{Donate Now}$ ) nail to the address below.
Name:		_ Date:		Phone:
Address:		Postal Code:		E-mail:

Signature: