



Membership Form

Thank you for your interest in the Glacier Grannies.
Please take a moment to fill out the following information.

Name: _____ Date: _____

(Please print clearly)

Phone Numbers: (home) _____ (cell) _____

Mailing Address: _____

Email: _____

The Glacier Grannies raise awareness and funds for the Grandmothers to Grandmothers Campaign of the Stephen Lewis Foundation. Having fun, forming friendships and mutual support are a natural outcome of our time together. We have a variety of activities you can choose from and your level of involvement is completely up to you – we are aware you probably have other interests and commitments.

Please indicate if you are interested in any of these areas:

Angel Making		Cycle Tour		Membership		Sewing	
Baking		Felting		Publicity		Smocking	
Cashier		Event Planning		Sales Tables		Treasurer	
Craft Coordinator		Event Setup		Secretary			

There will be optional opportunities to volunteer at our various events.

It is helpful for us to know if you have specific skills or interests which you would like to use to help the organization, e.g. creative skills, computer skills, fundraising experience, decorating flare, organizational ability, public speaking, social media, etc.

Skills: _____

Interests: _____

The Comox Valley Glacier Grannies and you agree only to use the membership directory for purposes within the group. It will be shared with the Stephen Lewis Foundation, so that you may receive periodic information directly from them, but with no-one else.

Yes: _____ No: _____ Yes but not my address: _____

Are you willing to have your photo in our media postings, e.g. Website, Facebook, newspaper?

We do not attach names to our photos. Yes: _____ No: _____

Membership is \$20 per year, cash or cheque. Cheques are payable to the Glacier Grannies. Please bring the completed form and payment to a meeting. Questions? Contact us at cvglaciergrannies@gmail.com

COMOX VALLEY GLACIER GRANNIES

Waiver of Liability: 'in Perpetuity'

As a member, I agree to release all other members, all steering committee members and all other volunteers associated with the Comox Valley Glacier Grannies for any bodily injury, damage to property, loss of property or loss of life or for any grievance arising out of the course of Comox Valley Glacier Grannies Group meetings, social events, or Group activities held by or organized by the Comox Valley Glacier Grannies or by any members of the Comox Valley Glacier Grannies. This waiver also applies to any other Stephen Lewis Foundation Grandmothers to Grandmothers groups and their members when I participate in a local or regional event.

I understand that participation in all Comox Valley Glacier Granny meetings and activities is conducted at my own risk.

I have read and agree with all terms and conditions shown above:

Name: (Please Print) _____

Signature: _____

Date: _____