



Membership Application Form

Mailing Address: 130 – 3757 Jacombs Road
Richmond, BC V6V 2R3

(PLEASE PRINT)

Date: _____

Adult Family Members	
Surname:	Surname:
First Name:	First Name:
First Name:	First Name:

Youth / Children (18 years and under)	
Surname	Birthdate (mm/dd/yyyy)
First Name:	
First Name:	
First Name:	

Resident Address:

Apt. Number	Street Number	Name of Street or Avenue
City	Province / State	Postal / Zip Code

Contact Address:
(if applicable)

Apt. Number	Street Number	Name of Street or Avenue
City	Province / State	Postal / Zip Code

Telephone: (____) _____ **Email:** _____

Preferred Method of Communication: Phone ☐ Email ☐

Additional Email addresses (if required):

Email: _____ **Email:** _____

Membership Fee Schedule	Initiation Fee (one-time fee)	Adult Member (voting member)	Associate Member (non-voting-member)	Youth Child (18 years & under)
	\$15.00 per individual	\$30.00	\$20.00	Free

I acknowledge that the contact information given by me on this form may be used for contact purposes only by the Casa. I also agree to abide by the policies, by-laws and standing rules of the Casa.

Applicant's Signature: _____

Purpose of the Association

A cultural and social club to bring together the Macaense Community, and to pursue, promote and provide Macanese social, cultural, historic, culinary, linguistic programs and activities for the members.

Sponsored by (voting members):

Name: _____ Date: _____

Signature: _____

Name: _____ Date: _____

Signature: _____

Accepted by Executive Committee - Date: _____

Name: _____ Signature: _____
President

Name: _____ Signature: _____
1st Vice-President

Name: _____ Signature: _____
2nd Vice-President

Name: _____ Signature: _____
Treasurer

Name: _____ Signature: _____
Secretary

Please make cheques payable to: **Casa de Macau Club (Vancouver)** and send with completed form to the mailing address shown.

Please make e-transfers payable to: **casademacaclubvancouver@gmail.com** and send completed form to the mailing address shown.