



## CRRC Membership Application Form

I, \_\_\_\_\_,  
would like to be a member of the Community and Race Relations Committee (CRRC).  
I agree to support the aims and objectives of the CRRC.

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Please select all that apply:

- I WOULD LIKE TO SUBSCRIBE TO THE CRRC ELECTRONIC MAILING LIST
  - I AM INTERESTED IN BECOMING A CRRC VOLUNTEER
  - I AM INTERESTED IN JOINING THE CRRC BOARD OF DIRECTORS
- 

### ANNUAL MEMBERSHIP FEES

- Adult (PWYC) suggested \$10.00                       Student \$5.00
- I would like to make a donation to CRRC in the amount of \$\_\_\_\_\_.
- I would like to sponsor another person's membership.

**Total payable \$\_\_\_\_\_.**

*Payable by cheque to Community Race Relations of Peterborough or etransfer to  
[admin@racrelationspeterborough.org](mailto:admin@racrelationspeterborough.org)*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_