

PROBUS CLUB OF CLARINGTON MEMBERSHIP APPLICATION



PLEASE	E COMPLETE THE FOLLOWING	G (Please	Print Clearly)
Name			
Address			City
Postal Code	Telephone	E-Mail	
Social activities,	hobbies & interests		
Former Vocation			
• I am intere	ested in helping on a commit	ee or in an exe	cutive position YES
photograph in the mor • My contact for <b>MEMB</b>	h taken at events to be publis othly Newsletter. c information will be printed o	shed on the PRC n the Membersh rdance with Pro	photographer if I do not want my BUS Club of Clarington Website or hip List and distributed to Members vincial Legislation, this information ities.
Date	Signature _		
	ED APPLICATION AND CHEQUE FOR		ation Fee & \$30 Yearly Fee)
SEND TO: Note: prorated rates claringtonprobus@gr	Probus Club of Clarington, c/o apply Jun. – Feb. email the men nail.com		
OUR CLUB MISSION			
			essional business people 55 and over social events throughout the year.

- MEETINGS
  - The club meets monthly on the first Wednesday of the month at 10:00 a.m. to 12:00 noon at Salvation Army Community Church Hall, 75 Liberty St. S., Bowmanville, Ontario.

Office Use Only			
Application Rec'd	_ Application Approved/Wait ListedMembership Fee		hip Fee
Cheque Rec'd	_Welcome LetterMen	mbership List	_Newsletter
Treasurer	Name Badge ordered	Name Badge rec/d	