

BTCA Membership Form



Name: _____ Spouse: _____
Address: _____
Postal Code: _____ Phone: _____ Fax: _____
Email: _____
Children under age 18: _____

I am interested in volunteering with the community association:

- | | |
|---|---|
| <input type="checkbox"/> Newsletter | <input type="checkbox"/> Sports |
| <input type="checkbox"/> Social Functions | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Maintenance | <input type="checkbox"/> Other (please specify) _____ |

The rates for Banff Trail Community Association membership are below. Make cheques payable to "The Banff Trail Community Association"

- \$10 Single
- \$15 Family & Household
- \$25 Business

**Please mail your form and payment to:
5 Creston Crescent NW, Calgary, T2M 4J9
Phone 403-451-6828 for more information**