



SINCE 2000

# Youbou TimberLess Society

## MEMBERSHIP APPLICATION & RENEWAL FORM

NAME(S): \_\_\_\_\_  
(Print All Names In Case Of *Family Membership*)

ADDRESS: \_\_\_\_\_  
(Print Full Postal Address)

CITY/TOWN: \_\_\_\_\_

PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_   
(Tick Box If You Wish Web News Delivery)

EXTENDED MEDICAL PLAN GROUP MEMBER

DUES PAID: \$ \_\_\_\_\_ DATE: \_\_\_\_\_  
(Date On Cheque)

**NOTE:** All information gathered is kept in strict confidence. New members are asked to mail this form with their cheque in favour of the “**Youbou TimberLess Society**” to the address below. All members in good standing will receive special notice by post when it is time to renew. To reduce administration costs, receipts will only be issued for amounts of \$50 or more. Membership dues paid beyond two years in advance will be credited as donations.

### SOCIETY MEMBERSHIP DUES

(NOV 08)

- ANNUAL INDIVIDUAL \$10
- ANNUAL FAMILY (per residence) \$25
- ANNUAL ORGANIZATION \$25
- LIFETIME (per individual) \$200

**YES!** I want to pledge a special **DONATION** to help the work of the **YTS**.

ADDITIONAL GIFT \$ \_\_\_\_\_

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