



THE UNIVERSITY
WOMEN'S CLUB
of VANCOUVER
at H Y C R O F T

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MEMBERSHIP APPLICATION

PLEASE FULLY COMPLETE FORM TO ENSURE PROMPT PROCESSING New Reinstatement

I am applying for the following membership (check one): Regular Associate

Confirmation of university graduation, post-secondary diploma, or equivalent is required for Regular membership.

Application Information

Name: _____

Address: _____

Phone (H) _____ (C) _____

Email: _____

Birthdate: M/ _____ D/ _____ Y/ _____

Educational Information

Name of undergraduate institution: _____

Location: _____ Graduation year: _____

Degree: _____ Field of study _____

Additional Degrees

Institution: _____

Location: _____

Other educational information (attach additional sheet if necessary):

Employment

Occupation: _____

If retired, former occupation: _____

Volunteer work and community involvement: _____

Interests

Please list any current interests or hobbies.

Please list if you're active on social media and provide your handle:

Facebook Twitter Instagram Other

Handle: _____

How did you hear about our club?

Name of member who referred you to the UWCV? (if applicable)

Please check all that apply. I am:

Currently under age 30

Currently a student enrolled in a full-time program of study

A dues paying CFUW Club member (club name) _____

May we publish your contact information and academic credentials in our newsletter, Hycroft Happenings, and in our Club Directory? Yes No

The purposes of the club are to:

- stimulate intellectual activity,
- facilitate fellowship, social responsibility, volunteerism and co-operation,
- promote an interest in public affairs, and afford members an opportunity to express a united opinion,
- promote the interest of members in educational issues and in the maintenance of high standards of education, and provide bursaries and scholarships, and
- do all such things as may be necessary or conducive to the attainment of these purposes.

All Applicants:

I, _____ submit this application and accept and support the Purposes and Policies of the University Women's Club of Vancouver. The founding mandate of the UWCV is to promote education, rights and opportunities for women and girls.

Signed: _____

Date: _____

Emergency contacts:

Name: _____ Tel: _____

Name: _____ Tel: _____

Privacy Policy

UWCV will collect and use only such personal information as is required for the operation of the Club and the provision of services to its members. Such information is never made available to the public. To view our complete Privacy Policy please visit our website at uwcvancouver.ca or ask our office for a printed copy.

For Office Use Only

Payment enclosed: Amount \$ _____

Copy of credentials attached:

For students, proof of full time enrolment attached:

Credit card registered:

Entrance fee paid:

For under 30, proof of age:

Dues: Annually Monthly Other