



## Latvian Canadian Cultural Centre Membership Application and General Donation Form

### Donor information:

\_\_\_\_\_  
First name

\_\_\_\_\_  
Surname

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Province

\_\_\_\_\_  
Postal code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email address

### I am applying for membership for:

myself     other     not applicable; I wish to make a general donation

If other:

\_\_\_\_\_  
First name, Surname

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Province

\_\_\_\_\_  
Postal code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email address

Date of birth: \_\_\_\_\_

I agree that my donation can be made public:  yes     no

**Donation:**    \$ \_\_\_\_\_  
(check made payable to "Latvian Canadian Cultural Centre")

Donor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Membership Approved by Board:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Membership number

\_\_\_\_\_  
Signature - Chair