



Latvian Canadian Cultural Centre Spidans Fund Membership Application form

I _____ graduated from Valodina or TLBSS Latvian School
First name, Surname

and would like to apply to the Spidans Fund to sponsor me to become a member of the LCCC.

School graduated: Valodina () TLBSS () Year of graduation: _____

Address

City Province Postal code

Telephone Email Address

Date of birth: _____

Signature: _____ Date: _____

Please e-mail filled out application form to: office@latviancentre.org

Membership Approved by Board:

Date Membership number Signature - Chair

Registered Charity 119009397RR0001
Latvian Canadian Cultural Centre
4 Credit Union Drive
Toronto ON M4A 2N8