



SIGN UP for a membership today!

COMMUNITY LIVING
St. Catharines



Inspiring Possibilities
for People with Intellectual Disabilities

You CAN make a difference!

By becoming an active and important participant of the Community Living movement you will demonstrate your support for individuals who have an intellectual disability and their families. The value you will then attribute to our Mission Statement will make all the difference to the people we support.

OUR MISSION—that people with intellectual disabilities have the opportunity to participate in all elements of living in the community.

Membership Application

September 2010 to September 2011

Do you wish to receive Materials related to: Newsletters Resource Materials Notices

Member Name

Parent/Caregiver/Guardian

Member Address

City/Town

Postal Code

In Lieu of
Membership Fees
Donations are greatly
Appreciated!

Donation \$ _____
(Tax Receipts will be issued)

Cheque Cash Visa MC

Card No. _____

Expiry Date: Month ____ Year ____

Name on Card: _____

Thank-you!
Your Support Is Important To Us

***The YMCA access is a privilege attached to your membership. The parent/caregiver/guardian MUST BE A MEMBER in order to qualify.**

YMCA PRIVILEGE

As a member and parent/caregiver of an individual supported by Community Living St. Catharines will entitle you to free access to YMCA facilities.

Note: The Parent/Caregiver must be accompanied by the individual in their care.

YMCA for: _____
Name of Person Supported

Please Return This Application To
Community Living St. Catharines
437 Welland Avenue, St. Catharines, ON L2M 5V2

For Office Use Only: Membership Card Number: _____

Mailed: Yes No

Comment:

Date: _____