

Greater Nanaimo Cycling Coalition

PO Box 441, Station A

Nanaimo, BC

V9R 5L3



Membership Form Individuals 2017:

Please check one: New Renewal

First Name :	_____	Last Name:	_____
First Person:	_____		_____
Second Person:	_____		_____
Children:	_____		_____
Address:	_____		
City:	_____	Province:	_____
Postal Code:	_____		
Telephone:	_____	Mobile:	_____
Email:	_____		_____

Check off membership type below:

_____ \$15 Individual _____ \$ Donation
_____ \$25 Family (up to 4 individuals)
_____ Amount enclosed

This information will be used only to inform you of upcoming events and will not be released to any other person or group.

Waiver: During GNCC activities, I will be responsible for own safety, and, if cycling, will obey all the rules of the road. I will participate only in those activities for which I am physically fit, and for which I have suitable equipment. I release the GNCC from all claims made by me or my successors regarding death, injury, or loss or damage to my property during any event or activity in which I was a participant or a volunteer.

Signature of applicant: _____ Date: _____
Signature of spouse (only for joint membership): _____ Date: _____

Interested in volunteering? Please check your area of interest:

- Help GNCC at special events at our booth or table
- Assist with courses at schools, rec centres or at workplace workshops
- Help get the word out. Phone calls, emails, flyer distribution
- Join an Advocacy Working Committee
- Provide us with your expertise _____
- Help with Membership drives, Website updates, the Newsletter
- Join a committee, even a hour a month helps us
- Other: _____

- With 8 volunteer committees, we work with local governments, community groups and businesses to improve cycling policies and infrastructure.
- Organize community cycling events promoting cycling to kids, families, students, workplace commuters, weekend riders and seniors - everyone!
- Provide bike education in schools, community centres, local businesses and bike shops. Please help us to make a difference

For Office Use Only:

Payment deposited by:
Added to Database:
Membership #: