



RICHMOND POTTERS' CLUB

7700 Minoru Gate
Richmond, BC V6Y 1R8
www.richmondpottersclub.com

DATE:

RENEWAL MEMBERSHIP FORM

ISSUING ID CARD #:

MEMBER'S INFORMATION

FIRST NAME:

LAST NAME:

ADDRESS:

CITY:

POSTAL CODE:

PHONE:

CELL:

EMAIL:

MEMBERSHIP FEES

\$150.00 PER YEAR (SEPTEMBER – AUGUST)
DUE IN FULL WHEN RENEWING

OPTION TO RENT A CUBBY HOLE IS AVAILABLE FOR
 \$10.00 PER YEAR (SEPTEMBER – AUGUST)

MEMBERSHIP DUES PAID BY: CHEQUE CASH AMOUNT PAID: \$

MEMBERSHIP COMMITMENTS

1 AS A MEMBER IN GOOD STANDING, HAVE YOU ATTENDED 3 BUSINESS MEETINGS IN THE PAST YEAR?
 YES NO

2 MY CLEAN-UP DATE IS:

3 I WILL BRING REFRESHMENTS ON:

4 I WILL BE CHAIRING _____ COMMITTEE(S) **OR**

I WILL **ACTIVELY PARTICIPATE** ON ONE OR MORE OF THE FOLLOWING COMMITTEES:

ARCHIVES

WEBSITE

TREASURER

GLAZING

CLASSES

HOUSEKEEPING

KILN

HEALTH & SAFETY

MEMBERSHIP

NEWSLETTER

LIBRARY

PROGRAMS

REFRESHMENTS

SALES

YOUR NAME AND PHONE NUMBER WILL BE FORWARDED TO THE
COMMITTEE(S) CHAIR