



RICHMOND POTTERS' CLUB

7700 Minoru Gate

Richmond, BC V6Y1R8

www.richmondpottersclub.com

RENEWAL MEMBERSHIP FORM

ID CARD #

MEMBER'S INFORMATION		
FIRST NAME:	LAST NAME:	
ADDRESS:	CITY:	POSTAL CODE:
PHONE:	EMAIL:	

MEMBERSHIP FEES		
<input type="checkbox"/> \$150.00 PER YEAR (SEPTEMBER – AUGUST) DUE IN FULL WHEN RENEWING	<input type="checkbox"/> OPTION TO RENT A CUBBY HOLE IF AVAILABLE FOR \$10.00 PER YEAR (SEPTEMBER TO AUGUST)	
MEMBERSHIP DUES PAID BY: CHEQUE <input type="checkbox"/> CASH <input type="checkbox"/> AMOUNT PAID: \$		

MEMBERSHIP COMMITMENTS	
1	AS A MEMBER IN GOOD STANDING, HAVE YOU ATTENDED 3 BUSINESS MEETING IN THE PAST YEAR? YES <input type="checkbox"/> NO <input type="checkbox"/>
2	MY SIGN UP DATE FOR CLEANING THE POTTERY STUDIO IS:
3	MY SIGN UP DATE FOR PROVIDING REFRESHMENTS IS:
4	I WILL BE CHAIRING _____ COMMITTEE(S) OR I WILL ACTIVELY PARTICIPATE ON ONE OR MORE OF THE FOLLOWING COMMITTEES: KILN <input type="checkbox"/> SALES <input type="checkbox"/> GLAZE <input type="checkbox"/>
YOUR NAME AND PHONE NUMBER/EMAIL WILL BE FORWARDED TO THE COMMITTEE(S) CHAIR	

TO REMAIN A MEMBER IN GOOD STANDING, I HEREBY AGREE TO ABIDE BY THE RICHMOND POTTERS' CLUB CONSTITUTION, BY-LAWS, MEMBERSHIP RULES AND STATEMENT OF ETHICS.

SIGNATURE: _____ DATE: _____