

Membership Form

Date: _____

Full Name: _____

Mailing Address: _____

Phone: _____ Email: _____

Preferred method of contact: phone email

Do you wish to receive our newsletter? yes not at this time

A Lifetime Membership is \$1.00 to \$20.00. Please contribute what you wish: \$ _____

What projects most interests you? Please circle all that apply:

EVENTS / PROGRAMS:	SUNRIVER COMMUNITY GARDENS:
<input type="checkbox"/> Apple Fest	<input type="checkbox"/> Grow a Row
<input type="checkbox"/> Farm & Film Night	<input type="checkbox"/> Community Orchard
<input type="checkbox"/> Seedy Saturday	<input type="checkbox"/> Native Plant Garden
<input type="checkbox"/> Food Recovery	<input type="checkbox"/> Apple Juice Pressing
<input type="checkbox"/> Farmer2Farmer network	

Do you have any special skills you would like to contribute to Food CHI? _____

Other comments: _____

Please return to: Sooke Region Food CHI Society, PO Box 1001, Sooke, BC V9Z 1J1

Sooke Region Food CHI will use personal information to communicate with you, process applications and to provide you with the services you have requested. Sooke Region Food CHI Society's collection of personal information is used only for the purpose that it was originally collected.