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Canadian Western Association of Floral Art Clubs  
(CWFAC)

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**MEMBERSHIP APPLICATION AND RENEWAL - 2021**

**CLUB MEMBERSHIP:**

**Name of Club:** \_\_\_\_\_

Website \_\_\_\_\_

**President - Name:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Treasurer - Name:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

By submitting this form you are giving permission for your information to be distributed to CWFAC Executive, Members and related Associations. (Sign) \_\_\_\_\_.

**How many members in your club?** \_\_\_\_\_ X \$ 1.00 = \$ \_\_\_\_\_

**Club Fee** \$ 50.00

**Total** \$ \_\_\_\_\_

**INDIVIDUAL MEMBERSHIP:** 1 X \$ 20.00 = \$ 20.00

**Name:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of club you belong to (if any): \_\_\_\_\_

Circle one: (Novice) (Intermediate) (Advanced) (Professional)

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Please mail this form with your cheque payable to: **Canadian Western Association of Floral Art Clubs.**

Mail to the Treasurer at: Joyce Wihnan, 1970 Dahl Crescent, Abbotsford, V2S 4B5.