

Fundraising Association MEMBERSHIP FORM

Name of Fundraising Association: **Families and Friends of J.J. Nearing Catholic Elementary School Society**

Name of School: **J.J. Nearing Catholic Elementary School**

Please complete and return this form to become a member of the Families and Friends of J.J. Nearing Catholic Elementary School Society (the "Society") by dropping off at the school office or emailing it to friendsofjjn@gmail.com.

All parents/legal guardians of students enrolled in the school are encouraged to become members of the Society. Other interested persons may become Community Members or Associate Members, subject to vested interest and bylaws, as approved by the Association. The majority of members of the Association will be parents/legal guardians. There are no membership fees. **Membership form must be completed annually.**

As a member (parent) of the Society I have the right to:

- receive notice of all meetings and fundraising activities
- serve on committees or chair fundraisers
- stand for election as an Officer or Director on the Board
- Add other rights as per bylaws: _____

The Society Bylaws can be found online on the J.J. Nearing website: <https://www.jjn.gsacrd.ab.ca>

The Society is required to obtain this information under the Societies Act for the Register of Members. All information will be used in accordance with the *Personal Information Protection Act (PIPA)*.

MEMBER INFORMATION:

Name:

Address:

Home Phone:

Cell/Alternate Phone:

Admission Date:

Date Membership Ceases:

Last day of this school year

Membership Type:

☐

Member (parent/legal guardian/primary caregiver of student in the school)

☐

Associate Member (advisory only - school staff)

☐

Community Member (provide a written letter of intent & be approved by board)

Email Address and Consent:

☐

YES, I consent to the use of my email for receiving fundraising and association information.

☐

NO, I do not consent to the use of my email address by the FRA.

I understand that I may revoke my consent or membership at any time. It is my responsibility to notify the FRA of any changes to the information contained in this form.

Date:

Signature:

