

CFUW Sunshine Coast

Membership Form

Please Print

Surname	First Name
Address	
Email	Telephone
Professional Background	
Post-Secondary Education (if applicable) and Degree or Diploma Achieved	
Skills that could be used in a mentoring capacity	
Is there an aspect of CFUW that is most important to you (e.g. bursaries, mentoring, program, advocacy, special events, other)?	
Is there an activity where you would be willing to contribute (e.g. Bursary Society, Board of Directors, volunteering for a specific club event, fundraising, social)?	
We would encourage you to use our website for information www.cfuwsc.org	
How did you learn about CFUW Sunshine Coast (e.g. friend, newspaper, website, other)?	
What year did you join CFUW?	
Signature	Date

Please complete this form and bring it with you to our next monthly meeting, or complete and email to cfuwsunshinecoast@gmail.com. Thank you.

2021-09-13