



Catholic Women's League St. Edward the Confessor Church

New Membership Application Form

Personal particulars:

First Name: _____ Last Name: _____

Address: _____ Apt./Unit # : _____ City: _____

Province: _____ Postal Code: _____

Phone: _____ Cell: _____

Birthday: _____(day)/_____(month) Email: _____

Parish services:

Are you a member of a Ministry? Yes, I am a member of _____ No

Are you available and willing to serve on a committee? Yes No May be later

Are there particular areas of work you may be interested in participating?

What are some of your talents and interests you may like to share with the Parish community?

Please check all that are applicable:

- I agree to receive emails for notices of meetings, events and other CWL issues.
- I would like to purchase a CWL Scarf (\$26.00)
- I would like to purchase a CWL Magnetic Name Tag (\$17.00)
- I will pay/have paid my membership fee (\$40.00) and my purchase indicated above by cash
- I will pay/have paid my membership fee (\$40.00) and my purchase indicated above by a cheque made payable to **St. Edward's Catholic Women's League**

Total Amount: \$ _____ Date: _____

Thank you for your application. You may send the completed form to us via the email address: stedwardcwl@gmail.com. Your membership will be activated once the annual membership fee is paid and received. The annual membership fee is \$40.00 and due on January 1 of each year. You may pay the membership fee and that for your purchase of CWL Scarf and Name Tag as indicated above by cash or cheque during one of the general meetings or put them in a sealed envelope to the attention of "CWL - Gerry Rebello" and leave it in the Parish Office.