



Membership Application Form

Memberships run from the date that payment is received for a period of one year

Please take a moment to update your information for us.

Facility Employed In: _____

Name: _____

Title: _____

Mailing Address: _____

Email Address: _____

Phone: _____

Fax: _____

Type	Cost	5% GST	Total Membership
Individual	\$90.00	\$4.50	\$94.50
2 Members	166.50	8.33	174.83
3 Members	243.00	12.15	255.15
4 Members	319.50	15.98	335.48
5 Members	396.00	19.80	415.80
6 Members	472.50	23.63	496.13
Student	40.00	2.00	42.00
Associate	270.00	13.50	283.50

**Note-There are discounts for registering 2 or more members in your facility!!

Would you prefer: (please circle your choice)

(a) An 8 ½ x 11 membership certificate **OR**

Name as it will appear on Cert. or Card

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Please remit form and make Cheque payable to Recreation Facilities Association of BC, PO Box 320, Suite 110 - 174 Wilson Street, Victoria BC V9A 7N7.

If paying by Credit Card or PO# - Fax the form to 604.414.0068 or contact the office @ 1.877.285.3421.

Be sure to register soon to enjoy all of the benefits that your association has to offer.