Interested in Volunteering?

Please indicate your areas of interest

- Board Activities
- Administration
- Community Programs
 - o Dine on the Dock
 - Music on the Dock
 - Paddling Centre
 - Harbour Tours
- Festivals
 - Heritage Boat Festival
 - o Kids' Pirate Day
 - Sea Life Celebration
- □ Heritage Vessels
 - o Ambassador program
 - Restoration
 - Stewardship
- Marina Beautification
 - Beautification
 - Administration Assistance
 - o Repairs and Maintenance
- Heritage & Edicatuon
 - Archives
 - o Educational Programs
 - Museum
 - Photographer
- LMS Welcome Centre
- Special Projects / Other _

PRIVACY

The personal information collected on this form is used by the Ladysmith Maritime Society solely for administering your Membership and/or Volunteer record(s). Administration will include contacting you by the methods you provide. Your information will not be shared with any other party except for the explicit purpose indicated above. For further information, contact the Society.

Membership & Volunteering

NAME (one line per person)	EMAIL	PHONE			
STATUS □ Member and/or □ Volunteer*					
STATUS Member and/or Volunteer					
STATUS □ Member and/or □ Volunteer					
I grant permission for LMS to publish my name & vessel name in its annual moorage roster (if applicable) Permission For LMS to publish my name & vessel name in its annual moorage roster (if applicable)					
MAILING ADDRESS: Please do not forget your Postal Code in your mailing address					
AA SP A LL					
Mailing Address					
	Po	ostal Code			
		John Code			
EMERGENCY CONTACT: name & number					
Emergence continuer, mane a number					

Membership Dues (circle one): \$20 single \$35 couple \$50 family \$5 youth <18 yrs

If you are <u>also</u> interested in volunteering, please indicate your **Volunteer Interests** to the left. *If you are interested in volunteering only, please fill in all information but note that there are *no membership dues*.

Please sign and mail to: PO Box 1030, Ladysmith BC, V9G 1A7 or drop off at the Marina Office at 611 Oyster Bay Drive.

FOR OFFICE USE	Date Paid	Amount Paid	CASH CARD CHQ #	POS Receipt #
Date Approved	Authorized By			LMS #
MMS payment	Volunteer	Other		Letter & Card Sent