



# Membership Volunteer Form

**YES!** I want to help the Trillium Party fight for a better Ontario

<http://www.trilliumpartyontario.ca>  
**MEMBERSHIP APPLICATION**

Name: \_\_\_\_\_  
P.O. Box: \_\_\_\_\_  
Street/Fire/R.R. #: \_\_\_\_\_  
Street/Road/Line Name: \_\_\_\_\_  
City/Town: \_\_\_\_\_  
Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Home Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Cell/Alternate Phone #: \_\_\_\_\_  
Email (if applicable): \_\_\_\_\_  
Date: \_\_\_/\_\_\_/\_\_\_ Signature: \_\_\_\_\_  
          M   D   Y

**Membership \$10.00** \$ \_\_\_\_\_  
**YES I would like to make a donation**  
 \$10.00    \$20.00    \$50.00    Other   \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

**Cheque #:** \_\_\_\_\_  
**Please make cheque payable to Trillium Party of Ontario, or**  
**CREDIT CARD #:** \_\_\_\_\_  
**Exp:** \_\_\_/\_\_\_

**NAME ON CARD** \_\_\_\_\_  
Please Print

**Signature:** \_\_\_\_\_

You may change or cancel this arrangement at any time by notifying the Trillium Party of Ontario in writing.



Please mail completed form to:  
Trillium Party of Ontario  
95 Cousins Dr.,  
Aurora, ON  
L4G 1B5

Or fax Credit Card Application to:  
1-905-953-9469

I would like to volunteer to help the **Trillium Party of Ontario**  
 I would like to organize or host a fundraising event for the **Trillium Party**

**Please write any unique skills or areas of interest you may have on the back of this sheet**

**Thank you for your support of the Trillium Party of Ontario!**