



Due with this application, is a one-time \$30 initiation fee plus \$45 annual fee (total \$75). Annual fees are payable on August 1st each year.

First Name: _____ Last Name: _____

Address: _____

Town: _____ Postal Code: _____

Phone Number: _____ Email: _____

Name to Appear on Badge: _____

Badge Type (circle one): magnetic * pin

Applicant's Former Vocation: _____

Areas of Interest: _____

**If you have a pacemaker, you may wish to order a pin badge as a magnetic badge could cause interference.*

- **The success of our PROBUS Club depends on Volunteers. This is a member-run Club.**

I am interested in helping on a committee or in an executive position YES

- I understand it is my responsibility to inform the photographer if I do not want my photograph to be published on the PROBUS Club of Ajax website or any club publications.
- The PROBUS Club does, when required, distribute a membership list to its management team including name, address, phone number and email address.

If you do not wish to have this information included, please check here.

- Do you have any Special Needs? (circle one): Yes or No.
If yes, please specify.

Signature: _____ Date: _____

For administrative use only

Approved on: _____