



Ridge Meadows Seniors Society

Membership Application Form

Date of Application: _____

First Name: _____

Last Name: _____

Address: _____

City/ Province/ Postal Code: _____

Primary Phone # : _____

Secondary Phone # : _____

Email Address : _____

Birthdate : _____

Over 90? Let us know & receive a complimentary membership!

Emergency Contact: _____

Relation: _____

Contact Phone # : _____

Will you be driving to the centres? YES / NO (circle)

★ How did you hear about us? _____

★ What programs are you interested in attending? _____

Are you interested in volunteering with us? YES / NO (circle)