

# membership application

## Spruce Cliff Community Association Membership

NAME

ADDRESS

POSTAL CODE

PHONE NUMBER

EMAIL

SIGNATURE

DATE

**Membership Type** (circle one):

Single/Senior (\$10)    Family (\$20)    #people in household \_\_\_\_\_

Have you held a SCCA membership before? (circle one):    Renewal    New

Payment (circle one):    Cash    Cheque

***Thank you for your support!*** Please drop-off this completed form and payment  
(cheque payable to S.C.C.A.) to **11 Tamarac Crescent SW**

OR contact Evelyn: 403.242.0740 or [evelynvdh@shaw.ca](mailto:evelynvdh@shaw.ca) to arrange pick up

*Memberships are valid for a one year period from the date they are issued*