***By signing and submitting this application, I acknowledge this information is true and correct.***

**Signature of Applicant**

**Date**

NORTH SHORE WINTER CLUB

Committee Application Form

**PLEASE PRINT CLEARLY**

Name (First & Last): Member Number:

Street Address: City & Postal Code:

Cell Phone #: Email:

Have you previously volunteered on a Committee at the North Shore Winter Club?  YES  NO If yes, which Committee?

1. Which Committee do you wish to join?
2. Please comment below on why you wish to join this Committee.

Please email your completed form to eallen@nswc.ca. Thank you for your interest!