



Membership Application

The aims of GaLTT are: *to secure, develop, and sustain a network of parkland and trails on Gabriola Island for the benefit of the public, and to preserve sites of environmental, historical, and social importance.*

PLEASE PRINT CLEARLY and PLEASE SEND YOUR APPLICATION WITH FUNDS TO: BOX 56, GABRIOLA V0R1X0

Type of membership:

- 1 year individual (\$25)
- 1 year family (\$35)
- 5 year individual (\$100)
- 5 year family (\$130)
- Monthly Donor (Minimum \$5/month)

Name(s): _____

Address: _____

City: _____ **Postal Code:** _____

Phone Number: _____

Email: _____

2nd Email (Optional, for family memberships): _____

Would you like to be added to the GaLTT email list for occasional notifications and newsletters?

- Yes
- No

Would you like to be notified about volunteer opportunities with GaLTT?

- Yes
- No

Comments/notes: _____

GaLTT will issue a Charitable Tax Receipt for all donations of \$20 or more, including membership fees. Our Charitable Registration Number is 846205342 RR00