



THE WINCHEVSKY CENTRE

585 Cranbrooke Avenue Toronto, Ontario M6A 2X9
 Telephone: 416-789-5502 Fax: 416-789-5981 E-mail: mws@on.aibn.com
 Visit our website at: www.winchevskycentre.org

MEMBERSHIP APPLICATION FORM

Membership Categories and Dues *(please select one only)*

Membership is structured through our parent organization, the United Jewish People's Order – Toronto Section

Individual - \$175.00 per year

Family * - \$250.00 per year

** includes 1–2 adults, children up to the age of 18, and/or full-time students*

ADULT 1

Family Name: _____ First Name: _____

Address: _____ Apt #: _____

City: _____ Postal Code: _____

Home Phone: _____ Email: _____

Date of Birth *(day, month, year)*: _____

ADULT 2

(only include information that is different from Adult 1)

Family Name: _____ First Name: _____

Address: _____ Apt #: _____

City: _____ Postal Code: _____

Home Phone: _____ Email: _____

Date of Birth *(day, month, year)*: _____

CHILD 1: Family Name: _____ First Name: _____ Date of Birth: _____

CHILD 2: Family Name: _____ First Name: _____ Date of Birth: _____

➔
Please complete 2nd page



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Winchevsky Centre Membership includes the following:

- (a) membership in:
 - UJPO – Toronto Section
 - UJPO – Canada
 - Morris Winchevsky School
- (b) voting privileges
- (c) eligibility for election to any formal body of the constituent organizations (UJPO and/or Morris Winchevsky School Boards)
- (d) eligibility for cottage ownership at Camp Naivelt and election to the Camp Committee
- (e) eligibility for mortuary benefit (cemetery privileges) upon payment of UJPO sustaining fund donation
- (f) eligibility for reduced rates for Morris Winchevsky School tuition
- (g) eligibility for discounts on all Winchevsky Centre events, including holiday celebrations, lectures, classes and special events
- (h) receives organization's newsletters

Organizational sponsors:

- 1) _____
- 2) _____

I have enclosed a cheque for membership dues, payable to *United Jewish People's Order*

Signature: _____

Date: _____

For office use only

Ratification Date by UJPO Board of Directors (Toronto Section): _____

Dues received: \$ _____ Date: _____ Receipt #: _____

Date processed: _____ By: _____