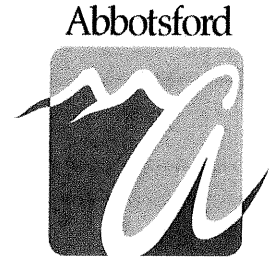




PO Box 2334  
 Abbotsford, BC V2T 4X2  
 Phone: (604) 852-6674 Fax: (604) 852-6631  
 Email: [agrifair@telus.net](mailto:agrifair@telus.net)  
 Website: [www.agrifair.ca](http://www.agrifair.ca)



**AGRIFAIR**

*"the best little country fair!"*

**MEMBERSHIP APPLICATION**

Abbotsford Agrifair was created in 1911 to promote and encourage agricultural awareness. Agrifair also provides social and recreational activities for the whole community at the annual fair and rodeo.

**\$10.00 MEMBERSHIP FEE DUE WITH APPLICATION**

**MEMBERSHIP VALID JANUARY 1<sup>ST</sup> TO DECEMBER 31<sup>ST</sup> , 2015**

**Membership has its privileges:**

You can vote at the Annual General Meeting

You will receive **one Gate Admission ticket including parking** for the current membership year

**FOR OFFICE USE ONLY**

<b>MEMBERSHIP #:</b> _____	<b>PAID BY:</b> _____ (ck,cash,credit)	<b>RECEIPT:</b> _____
----------------------------	--	-----------------------

**EVEN IF YOU ARE A CURRENT MEMBER – YOU MUST FILL OUT APPLICATION IN FULL!!!!**

**Please Print Clearly**

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Emergency Contact Name and Phone Number: \_\_\_\_\_

Valid Drivers License:  Yes  No

First Aid or CPR Training:  Yes -- what level? \_\_\_\_\_  No

What if any other language do you speak besides English? \_\_\_\_\_

Have you considered volunteering for Abbotsford Agrifair?  Yes  No  ALREADY DO!

If yes – what area interests you? \_\_\_\_\_

**Please Check All That Apply:**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Serving It Right  | <input type="checkbox"/> Cashier Training              | <input type="checkbox"/> Childcare          |
| <input type="checkbox"/> Computer Training | <input type="checkbox"/> Forklift/ Heavy Equipment     | <input type="checkbox"/> Carpentry/ Welding |
| <input type="checkbox"/> Bondable          | <input type="checkbox"/> Special Training/ Other _____ |   |

Renewal Membership  New Membership

Signature: \_\_\_\_\_ Date: \_\_\_\_\_