

Nostalgia Broadcasting Cooperative Inc. - CJNU 107.9 FM

Request for Membership

Last Name: _____ First Name(s): _____

Address: _____ City: _____ PostalCode: _____

Home Ph: _____ Work Ph: _____ Email: _____

We will occasionally contact you by mail, e-mail or 'phone with information on CJNU and Nostalgia Broadcasting Co-op. Personal information you provide will only be used by Nostalgia Broadcasting Cooperative for its legitimate operations.

Type of membership applied for (please check one):

Individual: _____ Joint (example spouses): _____ Company or Organization: _____

- **If Joint Membership**, please list names and addresses of your joint members below. **Note:** Only one of the joint members is allowed to vote at member meetings, and only one at a time may serve as a director.
- **If Company or Organization**, please list company name and address below, along with your position (officer or director). **Note:** You may appoint a representative to vote at member meetings.

As a member of Nostalgia Broadcasting Cooperative, I will support its goals and activities and be bound by its by-laws and policies. I understand that membership is subject to approval by the Cooperative's Board of Directors. I am at least 18 years of age. A full copy of by-laws and policies is available by request from the Secretary, Nostalgia Broadcasting Co-operative Inc. I understand that the first year's membership is \$40.00. Subsequent renewals will be at a rate determined by the Board of Directors from time to time.

My initial membership fee of \$40.00 is enclosed.

Cash _____ Cheque _____ Credit Card: _____
Name as it appears on Card (PLEASE PRINT)

Visa Mastercard Card Number _____ Expiry Date _____

Date: _____

Signature _____

Signature _____

Print name _____

Print name _____

For Joint Membership, please provide both names and signatures above.

**Send completed membership request to: Nostalgia Broadcasting Cooperative Inc.
P. O. Box 2282, Station Main
Winnipeg, MB, R3C 4A6**

Studio Telephone: 942-CJNU (2568) E-Mail: membership@cjnu.ca www.cjnu.ca

Interested in volunteering with CJNU? What would you like to do? (e.g. phone volunteer, operator, committees, etc. or special skills you can share with us) _____
