



AFRICAN COMMUNITY SERVICES OF PEEL
20 NELSON STREET, SUITE LL 102
BRAMPTON, ON
L6X 2M5
TEL: (905) 460-9514
FAX: (905) 460-9769

MEMBERSHIP APPLICATION

I wish to apply for membership to the African Community Services of Peel.

Name: _____

Organization (Optional): _____

Address: _____

City: _____ Postal Code: _____

Tel. (Home): _____ Tel. (Business): _____

E-Mail: _____

Fax: _____

I wish to become a volunteer as well Yes No

Enclosed is my membership fee of \$10.00 (\$15.00 for organizations) for the year.

Signature: _____

Date _____

Cheques should be made payable to:

African Community Services of Peel
20 Nelson St. Suite LL102
Brampton, ON
Canada
L6X 2M5
Telephone: (905) 460-9514
Fax: (905) 460-9769
E-mail: info@africancommunityservices.com
Charitable registration 890216344RR0001

Receipts available upon request.