

Retired Women Teachers of Ontario Organisation des enseignantes retraitées de l'Ontario

MEMBERSHIP FORM

NEW	RETUR				
BRANCH: Hamilton-Wentworth		(Associate's Hor	(Associate's Home Branch)		
PERSONAL	INFORMATIO	N (please prin	t)		
Name:					
Address:					
City:	Postal Code:				
Phone:			Mobile:		
Email:					
Date of Birth	ı:				
for Goodwill pur	poses only)		Day	Year	
Food Allergie	es:				
Emergency C					
Name:			Relationship:		
Phone:			Mobile:		

NOTES:

- Those without an email address will receive their Branch News by Canada Post.
- If you do not wish to appear in photos or videos on the RWTO/OERO or Branch website(s), in the Branch or Provincial newsletter or on Social Media such as Facebook and Instagram, please ask the photographer not to take your photo.

Signature	Date		
Please return your Membership Form and cheque to our	Make cheques payable to:		
Branch Membership Convenor:	RWTO Hamilton-Wentworth		
Karen Kasik rwto.karen@gmail.com 905-385-2100	Membership fee: \$60		
22 Borodino Court, Hamilton ON, L9B 2E8	Associate fee: \$20		