



EDGEWATER HOME & SCHOOL MEMBERSHIP 2023-2024



Please fill in EVERY section CLEARLY

H&S and QFHSA may contact you by sending correspondence to your home or by email

MEMBER INFORMATION (Parent)

MEMBER NAME: _____

HOME #: _____

MOBILE #: _____

E-MAIL – PLEASE WRITE CLEARLY: _____

ADDRESS (CIVIC #, APT #, STREET NAME, CITY, POSTAL CODE): _____

***** ALL COMMUNICATIONS WILL BE DONE BY EMAIL *****

STUDENT INFORMATION • 2023-2024 SCHOOL YEAR

CHILD'S NAME: _____

GRADE: _____

TEACHER: _____

CHILD'S NAME: _____

GRADE: _____

TEACHER: _____

CHILD'S NAME: _____

GRADE: _____

TEACHER: _____

CHILD'S NAME: _____

GRADE: _____

TEACHER: _____

MEMBERSHIP TYPE (Please select only one)

☐ \$ 20.00 FAMILY MEMBERSHIP

☐ \$ 2.00 ASSOCIATE MEMBERSHIP (MUST HAVE A CURRENT 2023-2024 MEMBERSHIP AT A SCHOOL OTHER THAN EDGEWATER)

NAME OF SCHOOL WHERE PRIMARY MEMBERSHIP IS HELD: _____

PAYMENT METHOD

☐ CASH (enclosed)

☐ CHEQUE (enclosed)

Please make cheque payable to **EDGEWATER H&S ASSOCIATION**

☐ E-TRANSFER to treasurer.edgewaterhands@gmail.com

• Question: Your first and Last name • Password: membership

THANK YOU FOR YOUR SUPPORT!!!

* DON'T FORGET TO JOIN OUR "EDGEWATER HOME & SCHOOL" FACEBOOK PAGE



www.facebook.com/groups/330736210352863

ADMINISTRATION ONLY

MEMBERSHIP #: _____

PAYMENT RECEIVED ☐ DATE (IF E-TRANSFER): _____

POLICE CHECK FORM COMPLETE: ☐

SIGNATURE OF EXECUTIVE: _____

