

PROBUS CLUB OF PORT PERRY MEMBERSHIP APPLICATION



PLEASE COMPLETE THE FOLLOWING (Please Print Clearly)

Name				
Address	Address		City	
Postal Code	Telephone	E-Mail		
Sponsor's Name				
Social activities, hobl Former Vocation	pies & interests			
 I am interested in helping on a committee or a management position YES NO I understand it is my responsibility to inform the event photographer if I do not want my photograph to be published on the PROBUS Club of Port Perry Website or any club publications Only my contact information will be printed on the membership list which is available to members for MEMBERSHIP USE ONLY To participate in in-person club activities, proof of Covid-19 vaccination is required 				
Date	Signatur	9		
PLEASE MAIL COMPLETED	APPLICATION TO: PROBUS CLUB OF POR	T PERRY		

LINDA PARRY 2481 ASHBRIDGE RD PORT PERRY, ON L9L 1B4

OUR CLUB MISSION

• To provide fun social activities for retired and semi-retired professional business people through meetings, guest speakers, interest group activities and social events throughout the year.

MEETINGS

• The club meets monthly on the 3rd Tuesday of the month at 10:00 a.m. to 12:00 noon at Hope Church, 14480 Old Simcoe Rd, Port Perry, Ontario

Office Use Only		
Application Rec'd	_ Application Approved/Wait ListedMembe	ership Fee
Cheque Rec'd	_ Welcome LetterMembership List	Newsletter
Treasurer	Name Badge ordered Name Badge rec/d	<u> </u>