

## **AUSTRIA VANCOUVER CLUB**

5851 Westminster Highway • Richmond BC V7C 1C3 Phone: 604-273-4725 (does not receive messages) Website: www.austriavancouverclub.ca

Email: info@austriavancouverclub.ca

The Austria Vancouver Club operates solely on the voluntary work of its members and is completely self-supporting. The Club has its own constitution as it was incorporated as a non-profit and non-partisan organization on December 16, 1971.

Persons of Austria Heritage are urged to run for office. Both German and English are spoken at our general meetings and the Club newsletter is usually written in both German and English. The objectives of the Austria Vancouver Club are to promote and maintain the Austrian culture, colloquial speech, traditions and folklore.

The Club has the following auxiliaries:

- Mixed choir (AVC Melody Choir)
- Mens choir (MGV Lyra)
- Folk dancers/Schuhplattler (AVC Edelweiss Dancers)

The Club offers the following functions:

- Family night most Fridays with dinner
- Bi-weekly dances Saturday with live music and dinner
- Summer Gartenfeste
- Oktoberfeste
- Air Rifle Range

All applications for membership must be submitted to the executives for approval. Upon acceptance as a member of the Club, the applicant will be expected to assist in the operations and functions of the Club.

## **NEW MEMBERSHIP APPLICATION** (Please print)

Address: Suite:	Street	:			
City:	Province:	Postal Code:			
e-mail 1:		1. Phone Cell:			
e-mail 2:		2. Phone Cell:			
Home Phone:		_			
Citizenship: 1.		_ I am of Austrian parent	age yes	no	
2		_ I am of Austrian parent	age yes	no	
Names of children for	Family Membership: (r	must be under 19 years of age)			
1		Birth Date:			
		Birth Date:			
2					
3.		Birth Date:			

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Is there another volunteer position that you would like to help with that is not listed? Do you have a trade that may be helpful in maintenance? Please let us know.

		************	*******	
		MEMBER	SHIP FEES:	
	INITIATION FEE (one	e-time fee):\$50		
	ANNUAL FEES:	Single(under 65)\$25	Couple/Family\$35	
		Single(65+)\$15	Couple(65+)\$20	
	TOTAL PAIL	D: \$		
			bank debit card (only available on site) sent with a service fee charged.)	
	PLEASE INDICATE	APPLICABLE FEE(S) AND ENCL	OSE WITH MEMBERSHIP APPLICATION	
	1.		2	
	Applicant's	Signature	2. Applicant's Signature	
	Date:			
	PLE		RSHIP CARD AT ALL EVENTS TO JR DISCOUNT.	
Plea	use note:			
•	To qualify for a coup	le membership, you must live in the	same household and proof must be shown upon request.	
•			r must be 65 at the time of membership application and proof ma	ıy
•	Children remain und attend post-seconda	er Family Membership until their 1 ry school. Proof may be requested	$19^{ ext{th}}$ birthday or are living with their parent or guardian while the	÷У
			Office Use Only:	
			Payment: Debit Credit Cash	
			Date Received:	

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Membership #2:

# of years purchased:

System updated: \_\_\_\_\_ Card updated: \_\_\_\_\_

<sup>\*</sup> For internal purposes only, information will not be disclosed to other parties.