



**“LIFETIME” Membership Form**  
**Hanover Area PROBUS Club**  
**Membership Year: September 1,2025 – August 31, 2026**

To celebrate the 5 year anniversary of the Hanover Area Probud Club, we will heretofore grant a Lifetime Membership to those who meet the following criteria:

- is a member in good standing
- has been an active member for 5 years
- will have reached the age of 85 by December 31<sup>st</sup> of this current year

Please provide the following information (PLEASE PRINT)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

☐ No Change to Address

Address: \_\_\_\_\_

Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Please Provide Current Phone Number Primary Phone Number: \_\_\_\_\_

Please Provide Current Email Address Email: \_\_\_\_\_

**Volunteer with Probud:** Volunteer members are a vital part of ensuring that our organization is sustained into the future ... Please identify areas where you can help ...

1. ☐ Assist with snacks and beverage preparation for the monthly meeting
2. ☐ Participate in organizing December Luncheon: collect \$, seating plan, decorations
3. ☐ Assist with Sales of We Share and Special Draw Tickets
4. ☐ Greeter: organizing name badges at beginning and end of meeting, welcoming guests
5. ☐ Assist Program Chair: introduce/thank speaker, circulate with microphone during questions
6. ☐ Newsletter: assist with production of monthly newsletter
7. ☐ IT Support: assist with meeting set-up and videos, website updates
8. ☐ Photographs: assist with organization & storage of club photos online
9. ☐ Organize an Activity Group: Details: \_\_\_\_\_
10. ☐ Serve on Management Committee as a Member-at-Large
11. ☐ I am unable to volunteer at this time.

**PLEASE COMPLETE PAGE 2 OF THIS FORM**

### **Membership Directory:**

Please let us know if we may include your contact information listed above in the **Hanover Area PROBUS Club** Directory.

### **Privacy Statement:**

The Contact Information which is included in the Printed Club Directory or Electronic Membership Listing is available for the personal use of MEMBERS ONLY ... it must not be provided to or used by any other person or business for any purpose.

- ☐ **I DO** give permission for my contact information to be included in the PROBUS DIRECTORY.
- ☐ **I DO NOT** give permission for my contact information to be included in the PROBUS DIRECTORY.

Signature: \_\_\_\_\_

### **Media Consent:**

During the membership year, Hanover Area PROBUS Club members may be photographed while participating in PROBUS activities. These photos, along with your name, and the activity in which you were participating, may be published on our Hanover Area PROBUS Club Website ([www.hapc.ca](http://www.hapc.ca)), or may be published on the PROBUS Canada Website ([www.probus.org/canada](http://www.probus.org/canada)), or may be published in our PROBUS newsletter/local newspapers/publications.

**Below, please indicate if you consent, or if you do not consent, to the above:**

- ☐ **I DO give permission** for my picture, name and activity information to be included on our Hanover Area PROBUS Website, our PROBUS Canada Website, and our PROBUS newsletter/local newspapers/publications.
- ☐ **I DO NOT give permission** for my picture, name and activity information to be included on our Hanover Area PROBUS Website, our PROBUS Canada Website, and our PROBUS newsletter/local newspapers/publications.

Signature: \_\_\_\_\_

### **Certification of Age Requirement:**

I, \_\_\_\_\_, hereby confirm that I will have reached the age of 85 by December 31<sup>st</sup> of this current year.

Signature of Applicant: \_\_\_\_\_

Signature of Witness: \_\_\_\_\_

**Please submit your completed form to the Membership Chair: in person at a meeting, by mail (contact Membership Chair at [mmbshp@hapc.ca](mailto:mmbshp@hapc.ca) for address) or by email (pdf file or screenshot) to [mmbshp@hapc.ca](mailto:mmbshp@hapc.ca).**