



Mauritius-Chinese Association of Ontario

安大略省模里西斯華人聯誼會

<https://mauritiuschineseassociation.com/>

Membership Registration Form

Instructions:

1. Once the form has been completed, please email it as an attachment to clubmcao@gmail.com for processing along with the membership payment.
2. Membership fees are as follows:
\$40 per person less than 80 years old as of January 01, 2025
\$20 per person 80 years and over but less than 90 years of age as of January 01, 2025
Free membership for persons 90 years and over as of January 01, 2025

For new members who enroll during the year, fees are calculated as follows:

- 1st quarter 2025 – Full year fee
- 2nd quarter 2025 – 75% of annual fee
- 3rd quarter 2025 – 50% of annual fee
- 4th quarter 2025 – 25% of annual fee

3. Membership fees are to be sent by e-transfer to mcaofinance@gmail.com or to the Treasurer/ Assistant-Treasurer by cash or cheque made payable to Mauritius-Chinese Association of Ontario.
4. Applicant will be informed by email or phone when registration process has been completed.

Membership Information

Full Last/First Name (Mr.): _____

Full Last/First Name (Mrs.): _____

Address: _____

City: _____

Province: _____

Postal Code: _____

Tel (Mr.): _____

Tel (Mrs.): _____

Email Address (Mr.): _____

Year of Birth¹: _____

Email Address (Mrs.): _____

Year of Birth¹: _____

Emergency Contact Name: _____

Emergency Contact #: _____

As a new member, we value your opinion. Kindly indicate the following:

- Your area of expertise e.g. Administrative, IT, Accounting, other _____

- Interested activities **(Please circle)**:

Line Dance, Yoga, Karaoke, Cardio, Arts, Outdoor activities, social gathering, group bus trip, other _____

- Other suggested activities?

Signatures:

I/We, Applicant/s hereby confirm that the printed name(s) is/are considered digitally signed.

Through my/our membership with MCAO, I/We acknowledge the club is run entirely through volunteer efforts. I/We agree to participate as a member or volunteer in committees and sub-committees, as required, to the best of my/our abilities.

- Print or Sign Name(s) _____ **Date** _____

- Print or Sign Name(s) _____ **Date** _____

¹ Required for senior programming