



## New Member Registration Form

Women's Institutes of Nova Scotia

Please print all information.

Name:
Mailing address:
Postal code:
Telephone:
Email:
Date of birth:
Name of WI Branch you are joining:
Have you been a member of another WI Branch? Yes or No If yes, name of previous Branch and location:
Are you a volunteer for any other group?
What would you like to learn from the Women's Institutes of Nova Scotia?
Today's date:

Thank you, and welcome to Women's Institutes!

Please print this form and return to the WINS office,  
Box 550, Truro, NS B2N 5E3  
or to the Secretary of your new WI Branch.

Your confidentiality is important to us. The Women's Institutes of Nova Scotia adheres to *The Freedom of Information and Protection of Privacy Act*, and as such, will not release personal information collected on this form. Information collected will be used by the organization for record keeping purposes and for planning future program topics.