



**ASSOCIATE (NON-VOTING) MEMBERSHIP
APPLICATION FORM**

First Name			
Last Name			
Street Address			
City, Province		Postal Code	
Phone			
Email Address			

☐ Add me to ICA's email list

I am interested in ICA because: (maximum 500 characters with spaces)
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ICA PRIVACY OF PERSONAL INFORMATION POLICY

The Inter-Cultural Association of Greater Victoria (ICA) complies with the *Personal Information Protection Act (SBC 2003), c. 63 (PIPA)*. ICA will not use your personal information other than for the purpose intended without your express permission. If you wish further information about ICA's privacy policies, you may speak to ICA's Privacy Officer.

☐ I consent to ICA using the information contained in this application for the management of the membership function of the organization.

SIGNATURE

DATE SIGNED

Last updated: July 20, 2020

Policy Number 7-1F

ICA bylaws including membership policies are found here www.icavictoria.org.

You will be notified on the status of your membership application upon review by ICA's Board of Directors. All memberships expire on March 31.

FOR OFFICIAL USE		PROTECTED B (when completed)	
Documents received ☐ Membership Application			
Date received		Screened by	
Date recommended to the Board		☐ Board Accepted ☐ Board Rejected	
Date approved by the Board (membership start date)			
☐ Member notified, and welcome package sent			