

# Manitoba Association of Senior Communities

## NEW MEMBERSHIP/RENEWAL FORM 2023-2024

Date:

Name of Organization				<input type="checkbox"/> New <input type="checkbox"/> Renewal
Street Address/Box #		City/Town		Postal Code
Phone Number		Primary Email		
Website				

Our Mission Statement: complete if new member or change to existing mission

Do you have an elected community board? YES NO

Staff/Board Contact		Position	
Phone (if different)		Email	

Staff/Board Contact		Position	
Phone Number		Email	

Other Contact (Optional)		Position	
Phone Number		Email	

Current activities conducted at/by your organization: (check all that apply)

Health & Wellness Programs       Education Programs       Social Events  
 Food programs       Transportation Services       Support Groups  
 Other: \_\_\_\_\_

Do you have hired staff? YES NO	If yes # of Full Time _____ # of Part Time _____
Do you carry insurance offered through MASC? HIROC: YES NO	Are any of your members/staff interested in Johnson Ins? YES NO UNSURE

MASC's membership year runs from April 1 – March 31. The \$100.00 membership fee is due by May 31, 2023. Cheque is to be made payable to **MASC**. Please ensure your centre/group name appears on cheque. Forward with this application to:

**MASC Membership**  
**Attn: C. Newman, Executive Director**  
**PO Box 54067 Silver Heights PO**  
**Winnipeg, MB R3J 0L5**



Would you like a membership certificate mailed to you? YES NO
--

\*If you require further information, please contact us. To ensure our records are accurate and up to date, please fill in this form as completely as possible. Thank you!

[info@manitobaseniorkommunities.ca](mailto:info@manitobaseniorkommunities.ca)

For Office Use Only

Date Received:	Cheque #	Data Entry	Cert. Mailed
----------------	----------	------------	--------------