**Application for Society Membership**

Thank you for your interest in joining Awo Taan Healing Lodge Society (ATHLS) as a member. Society membership in ATHLS is open to individuals who support the purpose, vision and mission of ATHLS. All Society memberships are by application and must be approved by the ATHLS Board.

To apply to be a Society member, please provide a

1. A signed Society membership application form and
2. A statement of support and understanding of Awo Taan Healing Lodge Society indicating how you as an individual, support and understand the purpose, Vision and Mission of Awo Taan Healing Lodge Society.

All Society member applications can be mailed to:

Awo Taan Healing Lodge Society

P.O. Box 6084, Station A

Calgary, Alberta T2H 2L3

Or email to Awotaan@awotaan.org

All applications for membership need to be approved by majority vote by the Awo Taan Healing Lodge Society Board at a regularly scheduled Board meeting.

Once the ATHLS Board has approved an application for society membership, the new member will be notified and will be required to submit a $5.00 fee for their one year membership. Your membership fee will become due annually on or before March 31st to maintain an active membership.

Membership becomes active upon receipt of your membership fee.

Society members will receive:

* `ATHLS newsletters
* Notice of all ATHLS public activities
* Invitation to attend our “by invitation only” ATHLS AGM

Thank you again for your interest in becoming a member of Awo Taan Healing Lodge Society.

Society Membership Application Form and Statement of Support for Awo Taan Healing Lodge Society

**Please print:**

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

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province: \_\_\_\_\_\_\_ Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please share as to why you want to become a Society Member of Awo Taan Healing Lodge Society.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have supplied ATHLS with my completed Society Membership application and I have filled out the above information accurately to the best of my knowledge.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, fully understand and support the purpose, Vision and Mission of ATHLS, and will honour and support the purpose, Vision and Mission of ATHLS if the Board approves my application to become a Society Member. I also understand that upon approval of my application, I will be requested to submit a $5 membership fee to formalize this application. The Society membership fee will be required in full upon receipt of an invoice issued by the ATHLS office.

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

Society Member Applicant’s Signature