



Victoria Rainbow Kitchen Society Membership Form

MEMBER INFORMATION	
Name:	Date:
Address:	City:
Postal Code:	Home Phone:
Other Phone:	Email:

I would like to be a member of Victoria Rainbow Kitchen Society

I am willing to embrace the Vision Statement of Victoria Rainbow Kitchen Society and uphold its Constitution, By-Laws and code of conduct for participants / members.

Vision Statement

- Provide nutritious meals and fellowship throughout the year for those in need as an expression of faith, philosophy or secular commitment.
- Create a safe and comfortable environment which enables the building of relationships, community spirit and support networks.

I give permission to use my member information for communicating information concerning Victoria Rainbow Kitchen Society

Signature: _____

Date:

Annual membership fee \$10.00

Date paid: _____

Or

Completion of 3 volunteer shifts or 5 volunteer hours.

Verified by: _____