

Membership Application

Name: Address:				☐ joining ☐ renewing		
City: Email: Phone:	Prov.: Po			ostal Code:		
	☐ individual 1-yea	r (\$25)	□ino	dividual 2-ye	ear (\$45)	
	☐ household 1-year	, ,	□ ho	ousehold 2-y	/ear (\$55)	
	☐ individual low in	come (\$10)				
Name: Email:	Additional househo	old member:				
Phone:						
1 110110.						
How	did you hear about ເ	ıs?				
□ web search		☐ social media		□ news/n	nedia	
☐ friends☐ other:		□ at an event		□ NCC m	nap	
•	u wish to pay by che cation and cheque m		•	leted memb	ership	
	Bike Ottawa					

Bike Ottawa PO Box 248, Stn B Ottawa, ON K1P 6C4