



ACGC

Alberta Council
for Global
Cooperation

2008 Membership Form

1. Organization Name: _____
Address: _____
Town / City: _____ Postal Code: _____
Telephone Number: _____ Fax Number: _____
Email Address: _____
Home Page Web Address: _____

2. Official Representative: _____
Address: _____
Town / City: _____ Postal Code: _____
Telephone Number: _____ Fax Number: _____
Email Address: _____ Title: _____

3. Membership Qualifications:
a) Please attach the mandate of your organization, from it's bylaws.
b) A brief letter outlining why your organization is interested in membership
c) Please indicate briefly what types of programming your organization is currently carrying out and attach any new materials you would like to share: _____

Your official representative will be the main contact person who will receive ACGC notices of events and queries, and is expected to represent the organization at any membership meeting as well as the **Annual General Meeting**. This person should also keep the Council informed of key activities of the organization to facilitate information exchange. If more than one person wishes to receive the e-updates – please note both email addresses.

4. Signature of Official Representative and/or Chairperson:
_____ / _____

5. Membership Fee: Please enclose a cheque or money order for \$100.00 payable to **Alberta Council for Global Cooperation**. Organizations unable to pay \$100.00 will be considered on a case-by-case basis. If a bursary is required, please submit this request in writing at the time of your application. Contact Diana Coumantarakis at (780) 988-0200 or dianaacgc@web.ca for further information.

Please send this form with fee payment to:

Alberta Council for Global Cooperation
#205, 10816A – 82 Ave Edmonton, AB T6E 2B3