



Membership Application Form of MGWPA 曼尼托巴长城艺术团会员申请表

Which kind of membership would you like to have?

Single \$10/ 2 years Student \$8/ 2 years Family Plan \$20/ 2 years (up to 4 cards)

English Name 英文名:		Gender 性别:	
Chinese Name 中文名:		Age 年龄:	
Phone # 电话号码 (home 家):		(cell 手机):	
E-mail address 电子邮件:			
Mailing address 邮寄地址:			
# Street	City	Province	Country Postal Code
A member before? 您以前是注册会员吗? No 不是 Yes 是 Old card #旧卡号码 _____			
Specialties or interests 特长或爱好:			

The following table is for Family Plan Membership only 请申请家庭卡的其他申请人填写下表:

Applicant 2 申请人 2	
English Name 英文名:	
Chinese Name 中文名:	
Phone # 电话号码(或 cell 手机):	E-mail address:
A member before? 您以前是注册会员吗? No 不是 Yes 是 Old card #旧卡号码 _____	
Specialties or interests 特长或爱好:	
Applicant 3 申请人 3	
English Name 英文名:	
Chinese Name 中文名:	
Phone # 电话号码(或 cell 手机):	E-mail address:
A member before? 您以前是注册会员吗? No 不是 Yes 是 Old card #旧卡号码 _____	
Specialties or interests 特长或爱好:	
Applicant 4 申请人 4	
English Name 英文名:	
Chinese Name 中文名:	
Phone # 电话号码(或 cell 手机):	E-mail address:
A member before? 您以前是注册会员吗? No 不是 Yes 是 Old card #旧卡号码 _____	
Specialties or interests 特长或爱好:	

Signature of main applicant 主申请人签名:

Date 申请日期:

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The following information is filled by MGWPA:

Payment received \$收到会费金额:      Received by 收款人签名:      Date 收款日期:

Card #s 会员卡号: \_\_\_\_\_

The card(s) will be valid until 会员卡有效期至:

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