



Native Addictions Council of Manitoba Membership Form 2023

Personal Information:

Name: _____

Address: _____ City: _____

Postal Code: _____ Phone Number: _____

Email: _____

Membership:

Membership in the Council shall be available to any persons of Aboriginal/First Nations ancestry who are eighteen (18) years of age or older and who resides in Manitoba and who is interested in furthering the Council's purposes and who have applied for and been accepted into membership in the Council by resolution of the board or in such other manner as may be determined by the board. Each member shall be entitled to receive notice of, attend and vote at all meetings of the members of the Council.

I, _____, confirm that the information above is accurate to the best of my knowledge, that I have completed a membership form and that I am eligible for membership at the Native Addictions Council of Manitoba.

Name

Date

Witness

Date

Please submit completed membership forms to:

Membership Clerk
c/o Executive Assistant
160 Salter Street
Winnipeg, MB R2W 4K5
e.assistant@nacm.ca
fax: 204-589-3921