



THE ARMY CADET LEAGUE OF CANADA – ALBERTA BRANCH APPLICATION FOR MEMBERSHIP

This Application for Membership is required for any individual joining the Army Cadet League of Canada – Alberta Branch.

I hereby apply for Membership in the Army Cadet League of Canada in the province of **ALBERTA**.

My position with the League will entail one of the following (**Insert initials in one category below**):

	1. As a National or provincial/territorial member with no direct and regular contact with youth.
	2. As a Regular contact with youth at a Corps: _____ <i>enter Corps Name/Number</i>
ALSO COMPLETE VOLUNTEER REGISTRATION FORM.	

Surname: _____ First Name: _____ Initials: _____

Address: _____ City/Town: _____ Prov: **ALBERTA**

Postal Code: _____ Telephone (R) _____ Telephone (B) _____

Fax: _____ Email: _____

Activities: List the activities, skills or functions of the Army Cadet League of Canada – Alberta Branch that are of interest to you.

The information contained in this application is correct to the best of my knowledge.

Signed this _____ day of _____, 20____, at _____, AB.

Witness: _____ Applicant: _____

Once completed this application is considered **CONFIDENTIAL**.