



### Application Form

- Postillion Subscription - \$25/year
- Individual Membership - \$25/year
- Organizational Membership - \$50/year
- Associate Membership - \$30/year

Name of Organization: \_\_\_\_\_

Name (Individual or Contact person): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Date: \_\_\_\_\_

Your Heritage:

- German
- Austrian
- Swiss
- Other \_\_\_\_\_

*For organization/associated membership only:*

- incorporated (*Please attach by-laws/constitution*)
- not incorporated



—SASKATCHEWAN—  
**GERMAN COUNCIL**  
LANGUAGE. CULTURE. TRADITION.

How did you hear about SGC?

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Why would you like to join SGC?

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Give us some history of your group (when did your group start, how many members are active, what are you activities, etc.)

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What is your mandate?

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What are your goals and objectives?

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