



**BRITISH COLUMBIA ORGANIZATION OF CARIBBEAN CULTURAL ASSOCIATIONS**

5240 Moncton Street, Richmond, BC V7E 3B3  
Tel: 604-274-6550 Fax: 604-285-4485 Email: nathomas@shaw.ca

**BCOCCA'S APPLICATION FORM FOR MEMBERSHIP**

I/We \_\_\_\_\_

apply for membership in the British Columbia Organization of Caribbean Cultural Associations (BCOCCA).

In the event of being accepted as a member of BCOCCA.

I/We agree to be bound by the provisions of the Constitution and Bylaws of BCOCCA including any variations to those provisions which may be made from time to time.

I/We enclose a cheque in the amount of \$ \_\_\_\_\_ to cover the membership fee if accepted, which shall be payable annually thereafter.

DATED this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

SIGNED: \_\_\_\_\_

NAME / ORGANIZATION \_\_\_\_\_

TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

CORPORATION NUMBER: \_\_\_\_\_

Eligibility Criteria for Membership is as per BCOCCA's Constitution and Bylaws.  
Membership types:

- Principal Members    Associate Members    Individual Members (*By invitation*)

*Please check one box.*

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**For BCOCCA'S use only**

Application Reviewed by BCOCCA

- Accepted                       Rejected

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

\_\_\_\_\_  
President's Signature