



# Lady Minto Hospital Auxiliary

*Supporting the comfort & care of patients and residents  
of Southern Gulf Island health-care facilities*

## MEMBERSHIP APPLICATION

Please complete this form and — Drop it off at our Thrift Shop or  
— Email it to [contact@lmhas.ca](mailto:contact@lmhas.ca) or  
— mail it to Lady Minto Hospital Auxiliary Society  
202 — 338 Lower Ganges Rd  
Salt Spring Island BC V8K 2V3

DATE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

PHONE # \_\_\_\_\_ EMAIL \_\_\_\_\_

What part of our organization would you like to donate your time and energy to?  
Please indicate your choices below.....

With residents at **Extended Care**? Day of the week? \_\_\_\_\_ AM? Or PM?

With residents of **Greenwoods/Braehaven**? On which day? \_\_\_\_\_ AM? PM?

Work at the **Thrift Shop**? Which day of the week? \_\_\_\_\_ AM? or PM?

Would you prefer working at home..... Knitting? Baking? Other craft?

You will be contacted by our Membership Officer to discuss volunteer duties, training, scheduling, security check, etc. After these preliminaries, and your payment of the \$7.00 annual fee, we will happily count you as a new Auxiliary member!

**THANK YOU FOR VOLUNTEERING**