



TRIUMF Alumni and Retirees Association TARA

Membership Application Form

All sections marked with a * must be completed before submitting the form.

Title *

Last Name * First Name(s) * Middle Initials *

Last Name whilst at TRIUMF if different from above

Address * City *

Province/State * Country * Postal/Zip Code *

Area Code Number Home Email *

Phone Number * Fax Number

Cell Phone Number

Employer (if TRIUMF, indicate which site) *

Primary Group you belonged to at TRIUMF *

First year at TRIUMF * Last year at TRIUMF *

Would you like your information made available to other TARA members via the secure association website?

If so, please check the appropriate items below:-

Name	Address	Phone #	Email
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Personal Information Protection and Electronics Documentation Act (PIPEDA) 2000

All information included on this form will be added to TARA's Database and will be used for TARA purposes only. These purposes may include: sending out TARA publications, with information regarding benefits and services available, events and reunions, support programmes, projects and volunteer opportunities. You have the right to object to the use of your data for any of the purposes listed above.

I agree to my data being held for the above purposes * **Please tick the appropriate button**

I do not wish my data to be used for any of the above purposes *

Are you interested in helping run TARA and/or helping with TARA events

Would you like to volunteer for TRIUMF activities, e.g. tour guide, events, etc:

Please print and mail or email (roy.w.moore@alumni.triumf.ca,tara@triumf.ca) this form to:-

TARA Membership Secretary
TRIUMF
4004 Wesbrook Mall.
Vancouver. B.C.
V6T 2A3
CANADA

Date * Day Month Year

Signature *

Image Field