



PAKISTAN CANADA ASSOCIATION OF EDMONTON

9226 39 Avenue NW, Edmonton, Alberta, Canada T6E 5T9 WWW.PCAEDMONTON.CA

MEMBERSHIP APPLICATION FORM

New and Renewal Membership Form for the Years 2026 and 2027

ALL INFORMATION IS MANDATORY. APPLICANT MUST BE 18 YEARS OR OLDER AND OF PAKISTANI ORIGIN. APPLICATION DATE: _____

APPLICANT(S) INFORMATION

#	FIRST NAME	MIDDLE NAME	LAST NAME	PHONE #	EMAIL ADDRESS	RELATIONSHIP WITH PRIMARY APPLICANT	AGE or Birth Year	SIGNATURE
1	<i>Primary</i>							
2								
3								
4								
5								
6								
ADDRESS				CITY & PROVINCE		POSTAL CODE		

APPLICANT AUTHORIZATION, CONSENT & DECLARATION

By submitting this membership application to the **Pakistan Canada Association of Edmonton (PCAEE)**, I acknowledge, consent, and agree to the following:

- Accuracy and Completeness of Information**
I hereby declare that all information provided in this application, including any information relating to myself and/or my family members, is true, accurate, and complete to the best of my knowledge and belief.
- Compliance with PCAEE Bylaws and Policies**
I agree to abide by the Constitution, Bylaws, policies, rules, and regulations of PCAEE, as amended from time to time.
- Membership Approval and Fees**
I understand that membership is not valid until formally approved by PCAEE. I further acknowledge that the membership fee of **\$10.00** (for the years 2026-2027) is non-refundable, regardless of approval status.
 - Applications can be completed and submitted in person or via one of the email addresses shown above in the applicant's information.
 - The membership fee can be paid via e-transfer, credit card or cash in person.
- Incomplete, False, or Misleading Information**
I understand that if mandatory information is missing, false, misleading, or incomplete, my application may be rejected or my membership may be suspended or cancelled.
I further acknowledge and agree that my/our application information, including signatures, may be verified for validity at any time during the membership period.
- Collection, Use, and Protection of Personal Information**
I consent to PCAEE collecting, using, retaining, and safeguarding my personal information for purposes reasonably related to membership administration, governance, communication, record-keeping, and delivery of PCAEE programs and services.
All personal information will be handled in accordance with Alberta's Personal Information Protection Act (PIPA) and other applicable privacy legislation.
- Communications, Marketing, and Electronic Consent**
I consent to receiving communications from PCAEE by electronic or other means, including notices, newsletters, event information, program updates, and Association-related announcements, in compliance with Canada's Anti-Spam Legislation (CASL).
I also consent to PCAEE using member-provided business information for member business promotion, community marketing, directories, event sponsorship recognition, and other PCAEE-related promotional activities.
I understand that I may withdraw consent for non-essential communications or marketing at any time by notifying PCAEE in writing.
- Disclosure and Safeguards**
I acknowledge that my personal information will not be shared with third parties except where required by law or where reasonably necessary for PCAEE operations. PCAEE will take reasonable administrative, technical, and physical measures to protect my information against unauthorized access, use, or disclosure.

MEMBERSHIP FEE AND PAYMENT METHOD

MEMBERSHIP FEE TOTAL E-Transfer CC Cash Full \$10/PP Senior \$10/PP Life \$1,000/PP

PAY & SUBMIT Pay fee at e-transfer@pcaedmonton.ca Submit form at membership@pcaedmonton.ca

OTHER DETAIL

Submitted by: _____
Applicant's Name, Date & Signature

MEMBERSHIP FEE AND APPLICATION

The membership fee can only be paid by the applicant for themselves residing at the same address. The fee must be paid by one of the applicants using the approved payment methods listed above. Completed and signed applications may be submitted in person or electronically via email. The Association reserves the right to request valid government-issued identification from the applicant at any time for verification purposes.

FOR OFFICE USE ONLY

Date Form Received		RECEIVED, VERIFIED & RECORDED & APPROVED BY:		
Membership Start Date		NAME	TASK	SIGNATURE & DATE
Membership End Date		President		
Type of Membership		General Secretary		
Membership # Assigned		Treasurer		
Comments		Vice President		

Membership Application Form Version 01 - January 01, 2026 / Mubeen

CONFIRMATION RECEIPT TO APPLICANT

Name: _____ Date: _____ Membership #: _____

OTHER INFORMATION: _____