



Member Renewal Form

Name: _____ Date: _____

Email: _____

What employee or community group do you represent:

Would you like to renew your membership:

***If yes**, your renewal is effective for two years. Please also inform your employee or community group leader that you have requested membership*

***If no**, please explain your reason(s) for leaving. This information helps us to understand concerns, improve our committee and learn from the experiences of our members*

Reason(s) for leaving:

Thank you for your service. Is there anything that you would like to add here? Please feel free to leave us a detailed message about the committee if you would like.