



MEMBER ORGANIZATION APPLICATION
UKRAINIAN CANADIAN CONGRESS
TORONTO BRANCH

Organization Name (*English*)

Organization Name (*Ukrainian*)

Address

Telephone

Email

Website

No. of members in organization

Year organization established

President

Name (*English*)

Name (*Ukrainian*)

Address

Telephone Email

Secretary

Name (*English*)

Name (*Ukrainian*)

Address

Telephone Email.....

**Member Organization's Delegates to the UCC Toronto
other than or in addition to President and Secretary**

Delegate #3

Name (English)

Name (Ukrainian)

Address

.....

Telephone Email

Delegate #4

Name (English)

Name (Ukrainian)

Address

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Telephone Email

Briefly describe your Organization's objectives and activities:

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Name of Board Members (if applicable):

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We hereby submit our application for membership together with our constitution and by-laws to the Ukrainian Canadian Congress, Toronto Branch

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President's name **President's signature** **Date**