

SALT SPRING SENIORS SERVICES SOCIETY
379 Lower Ganges Road Salt Spring Island BC V8K 2V4
250-537-4604

MEMBERSHIP REGISTRATION

Membership is for the calendar year and must be renewed each January - \$10.00

Name: _____ Date: _____, 2026

Address: _____ Postal Code: _____

Phone: _____ Email: _____

Welcome to Seniors!

We work with and for seniors in various capacities which we list below. Membership does not imply a commitment to volunteer, your interest and moral support are sufficient. However, if any of the following areas of service appeal to you, we are happy to tell you more about them. Put your skills and life experience to work in any of the following areas.

___ **Reception:** greet visitors, answer enquiries by phone and in person.
(2 - 4 HRS PER WEEK)

___ **Drivers:** drive seniors to medical appointments on and off island.
Please indicate your preference(s):
LOCAL: ___ VICTORIA: ___ SAANICH: ___ NANAIMO: ___ ALL: ___

___ **Dispatchers:** contact drivers and arrange rides for seniors.
(2 HRS PER WEEK)

___ **Luncheons:** help with our lunches on Thursdays.

___ **Programs:** use your skills to offer programs to our members, we encourage your participation. Please tell us more about yourself and how you would like to contribute.

OFFICE USE:

PAID: _____ NEW: _____ RENEWAL: _____

COPY TO COORDINATOR: _____