Breton High School Parent Council Advisory Society (BHSPCAS)

Membership Form

Please complete and return this form to the school to become a member of the BHSPCAS. All parents/legal guardians of students enrolled in Breton High School are encouraged to become members of the BHSPCAS. Other interested persons may become Community Members, subject to vested interest and bylaws, as approved by the Society. The majority of members of the Society will be parents/legal guardians. *There are no membership fees*.

As a member of BHSPCAS I have the right to:

- receive notice of all meetings and fundraising activities
- serve on committees or chair fundraisers(this is not mandatory)
- stand for election as an Officer on the Executive(this is not mandatory)

I understand the rights and responsibilities of being a member of BHSPCAS as outlined in the bylaws. The BHSPCA Society bylaws can be found on the school's website.

*If both parents want to become members of Breton High School Parent Council Advisory Society, *both* must complete and sign this document.

Member Information:	Member Information:
Name:	Name:
Address:	Address:
Home Phone #:	Home Phone #:
Cell/Alternate Phone#:	Cell/Alternate Phone#:
Email:	Email:
Membership Type: ☐ I am a parent/legal guardian of student in Breton High School. ☐ I am a Community Member (subject to approval) Community Members please indicate vested interest: (ie. Grandparent, former parent, etc.)	Membership Type: ☐ I am a parent/legal guardian of student in Breton High School. ☐ I am a Community Member (subject to approval) Community Members please indicate vested interest: (ie. Grandparent, former parent, etc.)
Email Consent: ☐ YES, I consent to the use of my email for receiving BHSPCAS information. ☐ NO, I do not consent to the use of my email address by the BHSPCAS.	Email Consent: ☐ YES, I consent to the use of my email for receiving BHSPCAS information. ☐ NO, I do not consent to the use of my email address by the BHSPCAS.
I understand that I may revoke my consent or membership at any time. It is my responsibility to notify BHSPCAS of any changes to the information contained in this form.	I understand that I may revoke my consent or membership at any time. It is my responsibility to notify BHSPCAS of any changes to the information contained in this form.
Date:	Date:
Signature:	Signature:

Breton High School Parent Council Advisory Society is required to obtain this information under the Societies Act. All information collected will be used in accordance to the *Personal Information Protection Act (PIPA)*. For more information please contact the BHSPCAS president. Contact info can be obtained through the Breton High School office.