

TECUMSEH CO-OPERATIVE HOMES INC. MEMBERSHIP APPLICATION

Dear Applicant:

Please return the completed application form to the office with a non-refundable application fee of \$15.00 for each applicant. Please bear in mind this is not the Membership Fee, once an applicant has been approved there will another one-time fee of \$15.00. Following that you will have to attend an Orientation and the Membership committee will interview you to determine whether to recommend your application for approval to the Board of Directors. Please note that the process can take several weeks.

You can drop off mail, fax or email your application to:

Mail to:

**Tecumseh Cooperative Homes Inc.
1 – 6555 Falconer Drive
Mississauga, ON L5N 3N6**

Fax to 905-821-8526

Email to: pm.tecumseh@bellnet.ca or admin.tecumseh@bellnet.ca

Sincerely,

Tecumseh Cooperative Homes

TECUMSEH CO-OPERATIVE HOMES INC.

Membership Application Form

1. Member - Applicant

First Name _____

Last Name _____

Female ☐ Male ☐

Date of birth (day/month/year) _____

Address (including postal code)

Phone (home) _____ Phone (work) _____

E-mail _____ Cell Phone _____

Please list all Members (those with Membership status) in the unit you reside in:

First Name	Last Name	Female/Male	Date of birth (day/month/year)	Relationship to Member

PARTICIPATION

All Co-op Members are expected to participate in some aspect of the co-op's management.

Please describe any participation you have done in the Co-op prior to this application

Are there any committees / Board of Directors that you might be interested in joining?

APPLICANT

Membership Committee Yes ☐

Social Committee Yes ☐

Finance Committee Yes ☐

Capital Planning Committee Yes ☐

Maintenance Committee Yes ☐

Newsletter Committee Yes ☐

Inspection Committee Yes ☐

Landscape Committee Yes ☐

Board of Directors Yes ☐

Do you have any skills or interests which you
could contribute to the Co-op? Specify

CO-APPLICANT

Membership Committee Yes ☐

Social Committee Yes ☐

Finance Committee Yes ☐

Capital Planning Committee Yes ☐

Maintenance Committee Yes ☐

Newsletter Committee Yes ☐

Inspection Committee Yes ☐

Landscape Committee Yes ☐

Board of Directors Yes ☐

Do you have any skills or interests which you
could contribute to the Co-op? Specify

2. Parking

List any vehicles you own

Make	Colour	Licence Number

3. Pet Policy

The Co-op has a pet policy that allows members to have pets in their households.
What pets do you have?

4. Employment

Please supply Tecumseh Co-op a Letter of Employment stating, length of service, salary and company name.

Social Insurance Number (for credit check only)

Name _____ S.I.N. _____

Name _____ S.I.N. _____

Signatures

I understand that Tecumseh Co-operative Homes Inc. is formed for the purpose of providing housing at cost to its members and that membership includes the responsibility to participate in the management and maintenance of the Co-operative.

I understand that this application must be accompanied by a \$15.00 non-refundable membership fee.

I declare that all the information in this application is correct and hereby authorize the Co-operative to verify any and/or all of the information contained herein.

Please print full

Signature

Date

PERSONAL INFORMATION PROTECTION STATEMENT

I agree that Tecumseh Co-operative Homes Inc. may keep the following information about me and I agree that this personal information **may be** made available to people in the following positions:

Information	Who we will share it with
❖ Member Application	❖ Staff
❖ Occupancy Agreement	❖ Co-op's Auditors
❖ Consent letters	❖ CMHC
❖ Letters to members	❖ Arrears Committee
❖ Housing Charge Increase	❖ Board of Directors
❖ Subsidy Information	❖ Collection Agency
❖ Arrears Information	
❖ Member information up-date	

I understand that Tecumseh Co-operative Homes Inc. will use the information to:

- a) contact me about this application
- b) determine my eligibility for housing and membership in the Co-op
- c) decide if I qualify for subsidy
- d) decide on any request for an internal move

I understand that the Co-op will destroy personal information that it no longer needs.

I have read and received a copy of this statement.

Signed_____ Dated_____

Signed_____ Dated_____

Signed_____ Dated_____

Signed_____ Dated_____

Signed_____ Dated_____