



Women for
Recreation,
Information and
Business

www.wrib.ca

email: membership@wrib.ca

P.O. Box 1155, Stn. F, 50 Charles St. E., Toronto, ON M4Y 2T8

Women for Recreation, Information and Business

WRIB is an organization dedicated to providing a social, informational, and business networking environment for lesbians, bisexual, transsexual, and transgendered women with common goals and interests.



Membership fees are kept at a minimum and are based on individual \$35 and corporate rates \$100. As a member of WRIB, you will receive information about up-coming events, access to our website and email bulletins, pro-rated admissions to many of our events, business networking and the opportunity to meet and be part of a dynamic, diverse, and fun group of women.

When you join WRIB, you are welcomed into an outstanding group of women from all walks of life, ethnic backgrounds, ages, and occupations. Membership in WRIB is open to all lesbian, bisexual, transgendered and transsexual women over the age of 19, without regard to race, colour, religion, national origin, ability, physical appearance, or age.



All of our social events, and business and informational networking meetings are open to both members and prospective members.

Our events include: singles' and couples' dinners ♦ golf ♦ movie nights ♦ Pride boat cruise ♦ euchre and games nights ♦ hiking ♦ meditation workshops ♦ bowling ♦ business networking ♦ guest speakers ♦ informative seminars ♦ great dances ♦ and our signature event, the Annual Holiday Dinner Dance!

MEMBERSHIP APPLICATION

Name _____ Email _____

Address _____ City _____

Postal Code _____ Tel (h) _____ Tel (c) _____

Membership Fee: Individual \$35.00 []

Important! Please read and sign below:

In consideration of being admitted to the membership of WRIB, I hereby release and forever discharge the WRIB organization, its Board of Directors, its participants, event hosts, organizers and members, from any and all liabilities, actions, causes of actions, claims and demands for damages, loss or personal injuries, howsoever arising and including, but not limited to, injuries arising from my participation in WRIB. I hereby acknowledge that there are no warranties or conditions, express or implied that events sponsored by WRIB shall be conducted so as to prevent or minimize the risk of personal injury, and further acknowledge that WRIB makes no representation whatsoever as to the competence or ability of participants. I further acknowledge that I am aware of all risks of participation of any activity and am voluntarily assuming all risks of personal injuries arising from my participation in WRIB. I acknowledge having read the above and understand the nature and the effect of the release.

Member's signature _____ Date _____

WRIB Authorization _____ Date _____

Please enclose a cheque payable to WRIB with this form

And return to: **W.R.I.B. Inc., P.O. Box 1155, Station F, 50 Charles St. East, Toronto, ON M4Y 2T8**