



2010-2011 Membership

I would like to become a member of West Niagara Second Stage and help abused women and their children in the West Niagara area.

*Name: _____

*Address: _____ *City: _____ *Postal Code: _____

Email: _____ Phone: _____

\$10.00 membership

*Signature _____

I would like to pay by VISA/MC # _____ Exp. ____/____ cheque enclosed

I would like to make a one time additional donation of \$ _____ - this donation will directly help the families in need with shelter and utilities

"The mandate of West Niagara Second Stage Housing & Counselling is to provide transitional support to survivors of domestic violence and their children. The project is committed to providing interim housing and professional counselling services to enable survivors to enhance and develop abilities necessary to lead independent lives.

The project provides survivors with temporary housing that is integrated into the communities of Grimsby, Lincoln and West Lincoln. PO Box 1115, Beamsville ON www.wnss.org

Please do not send cash in mail. Registered Charitable #: 867858979RP0001

* Required information for membership or donation receipts.