





MEMBERSHIP APPLICATION

Application Process:

Review our website to learn more about us and our current members, member benefits, and our Membership Policy.

Please complete this PDF form and submit to info@greencomunitiescanada.org. We'll review your application. The process should take one to three months if all questions are fully answered. If you have any questions, contact Executive Director Brianna Salmon, bsalmon@greencommunitiescanada.org.

Membership Criteria

Membership Criteria:
Please confirm that you meet the following membership criteria:
We are a non-profit corporation (or)
We are an Indigenous government / organization
We deliver community-based environmental programs
We serve a defined geographic territory (e.g., municipality, county, region). What is your defined territory?
We have our own governance structure
Application Details:
Organization Name:
Contact Name: Position:

E-mail: ______ Phone: ____

Website: _____ Date of Incorporation: _____

Are you a registered charity? Yes No If yes, date of Registration:







Mailing Address: _____







Application, continued:

Please provide evidence that you are community-based:

E.g., describe the geographic area you operate in, the populations you serve, and the partnerships you engage in. Please also consider including any endorsements, awards, or other evidence of your track record and positive reputation.

Please provide evidence of your environmental programming:

E.g., describe the environmental programming and services you offer, the scope of your delivery experience, and the current status of your activities. Please also consider including a link to any impact reports or publications that illustrate your focus on measurable results.







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CANADA					
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organizational capacity:	E @G	CCCan f	@GreenCommunities
Please list the number of paid staff you regul	arly employ: _		
Please list the number of volunteers who sup	port your pro	gramming:	
Please list the names and affiliations of your l	ooard or coun	cil member	S:
Please indicate whether you have any international following areas of focus:	al policies or p	rocedures i	related to the
Workplace Health and Safety Human Resources Diversity, Equity, and Inclusion Board Governance Financial Controls Fundraising and Donor Management Compensation and Living Wage			
Do you endorse GCC's Member Charter:		Yes	No
Please provide up to three references:			
Name: Relationship:	Contact:		
Name: Relationship:	Contact:		
Name:	Contact:		







