



## SASKATCHEWAN SENIORS MECHANISM (SSM) SUPPORTER APPLICATION FORM

**NAME OF ORGANIZATION** \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Postal Code \_\_\_\_\_ Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

**EXECUTIVE DIRECTOR** \_\_\_\_\_

(or other staff contact, if your organization has staff)

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Postal Code \_\_\_\_\_ Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

**PRESIDENT OF ORGANIZATION** \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Postal Code \_\_\_\_\_ Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Supporters of SSM receive regular communications from SSM including the quarterly Gray Matters publication, invitations to and information on various conferences and activities SSM is involved in, and can lend their support to advocacy on issues of significance to seniors. Supporters of SSM will be listed on the SSM website and can have a link to their organization from that website.

Becoming a Supporter of SSM is open to any group or organization whose membership is interested in supporting and advancing the interests of seniors. Supporters of SSM may participate in all activities of SSM, including the AGM, but do not have a vote and cannot apply for funding. There is no fee to become a Supporter of SSM. Every application to become a supporter will be subject to the approval of the Board of Directors of SSM.

**Describe your organization:**

a) number of members:

b) purpose/goals/mission:

c) activities:

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_