SCHEDULE "A" INTERNAL APPLICATION FOR MEMBERSHIP OR HOUSING RE-ALLOCATION

BRIDLE MANOR CO-OPERATIVE INC.

Date	Date
	(office use)
If you require clarification of any of Also, please note that all personal ir for membership or housing re-allocations.	f the questions or its meaning, please do not hesitate to contact the Co-op Office. nformation given here is strictly for the use of the Co-op in evaluating your request ation and will be kept confidential.
Name of Applicant:	Unit No
	B:
	ridle Manor?
	sibilities of a Co-op member? Yes No
3. Are you aware that as a member Yes No	you are required to attend Member's General Meetings held twice a year?
4. Would you like more information	n?
5. If accepted, which committees we	
6. Do you have any special skills or to the Co-op in general? If so, ple	interests which you feel would be an asset to any of the above committees and ease explain:
7. Do you belong to any clubs, chariti	ies, committees or special interest groups?
	NG RE-ALLOCATION, PLEASE COMPLETE THIS SECTION:
If accepted, your name will be placed	on the internal waiting list in order of date received.
Unit size requested: APARTMENT:	1 bedroom 2 bedroom
TOWNHOUSE:	3 bedroom 4 bedroom

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The following members ONLY will reside in the assigned unit unless other arrangements are made which must adhere to Co-op By-laws: BIRTH SEX of SURNAME **GIVEN NAME** RELATIONSHIP DATE **MEMBER EMPLOYMENT** If there are more than two people applying, please list additional information on the back of this page. Proof of income and a credit check will be required. APPLICANT #1 **APPLICANT #2** Name: Name: Employer: Employer: Address: Occupation: Occupation: Length of Employment: Length of Employment: _____ 1. Will you require a parking space? Yes ______ No _____ How many? _____ 2. Do you own a pet? Yes ______ No _____ 3. Will you require a housing charge subsidy? Yes ______ No _____ Signatures: