

MEMBERSHIP APPLICATION 2017

Canadian Masters Windsurfing Association, 90 Cliffcrest Drive Scarborough ON M1M 2K4



Name _____ Sail # _____
Address _____
City _____
Province _____
Postal Code _____
Tel. Home () _____ Cell () _____
Tel. Bus. () _____ Fax Bus. () _____
E-mail _____

Please choose the appropriate category and return this notice with your payment. Thank you.

- Individual Membership on or before April 30, 2017 _____\$35 Associate Membership** _____\$25
 Individual Membership after April 30, 2017 _____\$45 ** (men under 35/women under 30)
 Family Membership _____\$55

If a family membership is chosen, please provide the following :

Name of Spouse _____ Sail # _____ (if applicable)

Names of Children _____

Select your age group.

Men

- Apprentice Masters (35-44)
 Masters (45-54)
 Grand Masters (55-64)
 Olympian (Senior) (65+)

Women

- Apprentice Masters (30-39)
 Masters (40-49)
 Grand Masters (50-60)
 Olympians (Senior) (61+)

Please answer the following questions:

Would you be interested in receiving the newsletter and other information/communications via e-mail in pdf format or via regular mail? Please indicate:

- pdf via e-mail (please provide e-mail address above)
 regular mail

Do you need or want to receive a membership card every year? Yes No