

**ANNUAL APPLICATION FORM**  
**For the**  
**THE CANADIAN MASTERS CROSS-COUNTRY SKI ASSOCIATION**  
**MEMBERSHIP PERIOD MAY 1, 2016 TO APRIL 30, 2017**

Please print all information

NEW MEMBER(s) Yes \_\_\_\_\_ No \_\_\_\_\_

#1 First Name \_\_\_\_\_ Family Name \_\_\_\_\_

Birth Date \_\_\_\_\_ (d/m/y) Male \_\_\_\_\_ Female \_\_\_\_\_

#2 First Name \_\_\_\_\_ Family Name \_\_\_\_\_

Birth Date \_\_\_\_\_ (d/m/y) Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone ( ) \_\_\_\_\_ National Correspondence: English \_\_\_\_\_ French \_\_\_\_\_

E-mail \_\_\_\_\_ mobile phone: ( ) \_\_\_\_\_

Prov. Newsletter by Email: Yes \_\_\_\_\_ No \_\_\_\_\_

Signature(s) \_\_\_\_\_

Membership Fee ( # \_\_\_\_\_ @ \$20.00 ) \$ \_\_\_\_\_

Voluntary Donation \$ \_\_\_\_\_

Ski Draw (@ \$10.00 /ticket) \$ \_\_\_\_\_

Total Enclosed \$ \_\_\_\_\_

Make cheques payable to: **Canadian Masters X-C Ski Association**

**Mail cheque and completed form to**

**Ontario Provincial Director of the Canadian Masters**  
**Russ Evans**  
**24 Cortina Crescent**  
**Hamilton, ON**  
**L8K 4K4**