



Ontario Bobsleigh Skeleton Association (OBSA) Membership Application Form

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Email: _____ Primary Phone: _____

Please choose the applicable membership category in accordance with OBSA's by-laws, as published on its website:

	(a) Athlete Members – Shall consist of individuals who are active in the sports of Bobsleigh or Skeleton in the province of Ontario and who participate or may participate in a Bobsleigh Ontario Skeleton program
	(b) Non-Athlete Members – Shall consist of individuals who were formerly Athlete Members or who are otherwise engaged in furthering the sports of Bobsleigh or Skeleton in the province of Ontario
	(c) Lifetime Members – Shall consist of those individuals who have contributed long and meritorious service to the Association or who have made an outstanding contribution to the Association.

I, _____ (print name) on this

the _____ day of _____, 20__ apply for membership with Ontario Bobsleigh Skeleton Association (OBSA) and agree to obey and be bound by the by-laws, rules and regulations of the OBSA. I understand that the membership period is from June 1 until May 31 of the following year.

_____ Signature

If the Athlete Member is a minor the name and signature of the Athlete Member's parent or guardian is also required:

_____ Parent name _____ Parent signature

PLEASE RETURN APPLICATION FORM to Ontario Bobsleigh Skeleton Association at:
admin@ontariobobsleighskeleton.ca

Your application will be processed in accordance with OBSA's by-laws, including notification of appropriate fee(s), if applicable. See <http://ontariobobsleighskeleton.ca> for OBSA by-laws and additional information.