



NEW MEMBER APPLICATION

Date _____

Organization Name _____

Contact Name _____ Title _____ Phone _____

Email _____ Staff Contact _____ Position _____

Office Phone _____ Fax _____ Email _____

Website _____ Facebook www.facebook.com/ _____

Twitter @ _____ YouTube _____

Mailing Address _____
Street City postal code

Sports Programming Offered _____

Governing Body (PSO) _____

Number of Organization's Participants & Ages

Total# Participants _____ Total Female _____ Total Male _____

Recreational _____ Elite _____ Youth _____

Senior/Master _____ Competitive _____ Children _____

Adult _____ Athletes with Disabilities _____

Mail, email or drop off your completed application to:

Kamloops Sports Council
262 Lorne Street
Kamloops BC V2C 1W1

Ph: 250-828-3822 Fax: 250-828-3599

Email: info@kamloopssportscouncil.com

❶ Enclosed is the \$35.00 Membership Fee (cash/cheque/PayPal)