DIRECT MEMBERSHIP DATA CHANGE
FORM 102-Direct

Membership #: _____
Club: _____
(New) Club: _____

COMPLETE ONLY WHAT IS DIFFERENT

Last Name: _____ First Name:
(New) Last Name: _____
(New) Address: _____
(New) City: _____ (New) Province: _____ (New) Postal Code: _____
Phone: _____ (New) Home _____ (New) Work _____ (New) Cell
(New) Email: _____

(New) Canadian Citizen: Yes ❑ No ❑
(New) Permanent Resident: Yes ❑ No ❑

I have viewed the Birth Certificate and verify the above information to be correct _____ Signature (Club Registrar)

CHANGE or ADDITION

Check ☑ only **NEW** Membership Type

Type	Description	Fee Oct. 31
☐ **A**	Competitive	$ 45.00
☐ **B**	Pre-Events (All Graded Events)	$ 15.00
☐ **BR**	Recreational/Skills Development	$ 10.00
☐ **C**	Technical Association:	$ 65.00
☐ **D**	Board, Executive, Full Member	$ 40.00
☐ **E**	Volunteer	$ 10.00
☐ **G**	Group ONLY athlete	$ 15.00

Check ☑ only **NEW** Technical Certification

Coach	Course Conductor	Judge	Course Conductor	Adjudicator	Course Conductor
☐ L1 CIT	-	☐ M1	☐	☐ S1	☐
☐ L1	☐	☐ M2/M3	☐	☐ S2	☐
☐ L2	☐	☐ Masters	☐	☐ S3	☐
☐ L3	☐		☐	☐ S4	☐
No Fee required if adding Levels or Modules or Sections.			☐	☐ S5	☐

Pay the difference between original amount and the upgrade amount. Example: Athlete changing from Type B to Type A would be pay $30.00 (i.e. the difference between $50.00 and $20.00)

Payment Enclosed $ _____
Payment: Cheque [ ] Money Order [ ]

"C" TECHNICAL ASSOCIATION

Adjudicator
☐ Active ☐ Inactive

Coach
☐ Active ☐ Inactive

Judge
☐ Active ☐ Inactive

Course Conductor
☐ Active ☐ Inactive

TERMS & CONDITIONS: I agree that my membership is subject to the athlete's agreement and to the Rules, Regulations and By-Laws of the Canadian Baton Twirling Federation. The member agrees that, whether or not such damages or losses are caused by negligence; in no event shall the Canadian Baton Twirling Federation or its directors, officers or employees have any liability to the member for damages or losses of any kind whatsoever or for any indirect, special or consequential damages even if advised of the possibility of such damages.

_____ Signature (Parent/Guardian if under 18 years of age)
_____ Date

Return to: National Registrar
c/o Beth Jamieson
#1005, 2200 Woodview Drive SW
Calgary, AB
T2W 3N6

For National Personnel use only:

Registration Date	*Membership Number*	*Amount $*	
Proof of Age ☐	*Citizenship ☐ or Permanent Residency ☐*		*Signature - CBTF 2nd Vice President*

Original - CBTF 2nd VP/Data Entry *Copy - Club Director or Direct Member* ***Effective October 2011***