DIRECT MEMBERSHIP APPLICATION
FORM 103-Direct
October 1, _____ to December 31, _____
YEAR YEAR

New Membership ☐

PLEASE PRINT

Last Name: _____ First Name: _____

Address: _____

City: _____ Province: _____ Postal Code:

Phone: _____ Home _____ Work _____ Cell

Email: _____ Club Name: _____

Birthdate: _____ / _____ / _____ Age as of Dec 31, _____ Female ❑
YEAR MONTH DAY Current year Male ❑

Are you a Canadian Citizen: Yes ❑ No ❑ I have viewed the Birth Certificate and _____
Permanent Resident: Yes ❑ No ❑ verify the above information to be correct Signature (Club Registrar)

MEMBERSHIP TYPE - Check and complete all that are applicable
- New Members always pay fee in first column (Oct 31 fee)
- Returning Members pay fee based on registration date (Oct 31 / Nov 15 / Mar 1 fee)

Type	Description	New Members OR Returning Members If Fee Received By Oct. 31	Returning Members If Fee Received After Nov. 15	Returning Members If Fee Received After Mar. 1
☐ A	Competitive (Individual/Duet/Group athletes)	$ 45.00	$ 90.00	$ 110.00
☐ B	Pre-Events (All Graded Events)	$ 15.00	$ 15.00	$ 15.00
☐ BR	Recreational/Skills Development (Badge)	$ 10.00	$ 10.00	$ 10.00
☐ C	Technical Association: (Check ONLY if ACTIVE) Adjudicator ☐ Coach ☐ Judge ☐ Course Conductor ☐	$ 65.00	$ 130.00	$ 155.00
☐ D	Board, Executive, Full Member	$ 40.00	$ 80.00	$ 96.00
☐ E	Volunteer	$ 10.00	$ 10.00	$ 10.00
☐ F	Group ONLY athletes	$ 15.00	$ 30.00	$ 36.00

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***