APPLICATION FOR ANNUAL MEMBERSHIP 2021-2022



Payment Received

September 1, 2021 - August 31, 2022

Preferred Name: Address: City:	Return to:	Kevan Latrace, CNBTA President 204 Gibbons Street Oshawa, Ontario L1J 4Y4		Membership # Renewal New Membership		_
Address: City:	Last Name:			First Name:		_
City: Prov: Postal Code: Phone:	Preferred Name	e:				_
Phone:	Address:					_
Gender: CIS Female CIS Male Trans Female Trans Male Other Prefer not to Specify Coach(es): Coach(es): Coach's email: Information Required for Athletes Only Date of Birth: Y/M/D Age as of September 1, 2021 Country of Citizenship: Canadian Resident: Landed Immigrant: New athletes: Photocopy of birth certificate or proof of Canadian citizenship MUST accompany new membership application. New athletes: Photocopy of birth certificate or proof of Canadian citizenship MUST accompany new membership application. New athletes: Photocopy of birth certificate or proof of Canadian citizenship MUST accompany new membership application. New athletes: Photocopy of birth certificate or proof of Canadian citizenship MUST accompany new membership application. New athlete Encreational	City:		Prov:	Postal	Code:	_
Club Name: Coach(es):	Phone:		ema	ail:		_
Coach(es): Coach Semail:	Gender: CIS Fer	male CIS Male Trans Fe	male Trans	Male Other	Prefer not to Specify	
Information Required for Athletes Only	Club Name:					_
Information Required for Athletes Only Date of Birth: Y/M/D Age as of September 1, 2021 Country of Citizenship: Canadian Resident: Landed Immigrant: New athletes: Photocopy of birth certificate or proof of Canadian citizenship MUST accompany new membership application. New athletes: Photocopy of birth certificate or proof of Canadian citizenship MUST accompany new membership application. New athletes: Photocopy of birth certificate or proof of Canadian citizenship MUST accompany new membership application. New athletes: Photocopy of birth certificate or proof of Canadian citizenship MUST accompany new membership application. Membership Fees*	Coach(es):					_
Country of Citizenship: Canadian Resident: Landed Immigrant: New athletes: Photocopy of birth certificate or proof of Canadian citizenship MUST accompany new membership application. Membership Fees*	Coach's email:					_
Country of Citizenship: Canadian Resident: Landed Immigrant: New athletes: Photocopy of birth certificate or proof of Canadian citizenship MUST accompany new membership application. Membership Fees*			Information Req	uired for Athletes Only		
Membership Fees* By Oct 31	Date of Birth: Y	//M/D		Age as of Septeml	ber 1, 2021	
Membership Fees* By Oct 31	Country of Citiz	enship:	Can	adian Resident:	Landed Immigrant:	_
Membership Fees* By Oct 31						
Athlete Competitive \$ 45.00 \$ 85.00 * Select all categories to be registered for Coach \$ 45.00 \$ 85.00 * Pay only one fee for the highest level Judge \$ 45.00 \$ 85.00 * Pay only one fee for the highest level Associate-Voting \$ 45.00 \$ 85.00 * All athletes require an affiliation to a registered Associate-Voting \$ 45.00 \$ 85.00 * CNBTA coach Volunteer - non voting \$ 5.00 \$ 5.00 * Includes accident & liability insurance premium ALL RENEWALS RECEIVED AFTER DEC 31 WILL NOT BE ACCEPTED NEW MEMBERS ARE NOT SUBJECT TO LATE FEES AND MAY REGISTER AT ANY TIME TERMS AND CONDITIONS: I agree that my membership is subject to the Canadian National Baton Twirling Association (CNBTA) Code of Practice and to the Constitution, By-laws and Rules of the Regulations of the CNBTA. The member agrees that any damages or losses, whether or not such damages or losses are caused by negligence or omission, shall not hold the CNBTA or their directors, officers or employees any liability to the member for such damages or losses. This includes any indirect consequential, special or compensating damages even if having been previously advised of the possibility of such damages. I understand photographs of me may appear on the CNBTA website, in print, brochures, social media or other promotional material. My name may be published in result listings. (Parent or guardian permission if under 18 years of age). Insurance certificates will be issued to all coaches only when completed membership forms and payment have been received by CNBTA Membership Co-ordinator. Any payment returned for insufficient funds will be subject to a \$25.00 surcharge, payable within 10 days of notification. By signing below, I confirm I have read and accept the CNBTA Code of Practice and agree to receiving general information in regards to CNBTA to the email address listed above. ANY CHANCES TO THE INFORMATION ON THIS FORM MUST BE REPORTED TO CNBTA MEMBERSHIP CO-ORDINATOR IMMEDIATELY AT – cnbtamembership@gmail.com.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,	
Athlete Competitive \$ 45.00 \$ 85.00			Memb	ership Fees*		
ALL RENEWALS RECEIVED AFTER DEC 31 WILL NOT BE ACCEPTED NEW MEMBERS ARE NOT SUBJECT TO LATE FEES AND MAY REGISTER AT ANY TIME TERMS AND CONDITIONS: I agree that my membership is subject to the Canadian National Baton Twirling Association (CNBTA) Code of Practice and to the Constitution, By-laws and Rules of the Regulations of the CNBTA. The member agrees that any damages or losses, whether or not such damages or losses are caused by negligence or omission, shall not hold the CNBTA or their directors, officers or employees any liability to the member for such damages or losses. This includes any indirect consequential, special or compensating damages even if having been previously advised of the possibility of such damages. I understand photographs of me may appear on the CNBTA website, in print, brochures, social media or other promotional material. My name may be published in result listings. (Parent or guardian permission if under 18 years of age). Insurance certificates will be issued to all coaches only when completed membership forms and payment have been received by CNBTA Membership Co-ordinator. Any payment returned for insufficient funds will be subject to a \$25.00 surcharge, payable within 10 days of notification. By signing below, I confirm I have read and accept the CNBTA Code of Practice and agree to receiving general information in regards to CNBTA to the email address listed above. ANY CHANGES TO THE INFORMATION ON THIS FORM MUST BE REPORTED TO CNBTA MEMBERSHIP CO-ORDINATOR IMMEDIATELY AT—cnbtamembership@gmail.com. Signature (Parent/Guardian's signature if under 18 years of age) Date		Athlete Competitive \$ 45.00 Athlete Recreational \$ 15.00 Coach \$ 45.00 Judge \$ 45.00 Associate- Voting \$ 45.00	\$ \$ \$ \$ \$	85.00 * Sele 25.00 * Pay 85.00 * All a 85.00 CNB	only one fee for the highest level athletes require an affiliation to a TA coach	registered
the Constitution, By-laws and Rules of the Regulations of the CNBTA. The member agrees that any damages or losses, whether or not such damages or losses are caused by negligence or omission, shall not hold the CNBTA or their directors, officers or employees any liability to the member for such damages or losses. This includes any indirect consequential, special or compensating damages even if having been previously advised of the possibility of such damages. I understand photographs of me may appear on the CNBTA website, in print, brochures, social media or other promotional material. My name may be published in result listings. (Parent or guardian permission if under 18 years of age). Insurance certificates will be issued to all coaches only when completed membership forms and payment have been received by CNBTA Membership Co-ordinator. Any payment returned for insufficient funds will be subject to a \$25.00 surcharge, payable within 10 days of notification. By signing below, I confirm I have read and accept the CNBTA Code of Practice and agree to receiving general information in regards to CNBTA to the email address listed above. ANY CHANGES TO THE INFORMATION ON THIS FORM MUST BE REPORTED TO CNBTA MEMBERSHIP CO-ORDINATOR IMMEDIATELY AT — cnbtamembership@gmail.com. Signature (Parent/Guardian's signature if under 18 years of age) Date		ALL RENEW	/ALS RECEIVED AFT	FER DEC 31 WILL NOT BE	ACCEPTED	
	the Constitution losses are cause damages or loss possibility of su promotional ma be issued to all returned for ins accept the CNB ANY CHANGES	n, By-laws and Rules of the Regulations ed by negligence or omission, shall not ses. This includes any indirect consequench damages. I understand photographs aterial. My name may be published in recoaches only when completed member sufficient funds will be subject to a \$25.0 TA Code of Practice and agree to receiving the support of the INFORMATION ON THIS FORM IN	of the CNBTA. The hold the CNBTA or cential, special or cential, s	e member agrees that any their directors, officers of compensating damages erron the CNBTA website, ent or guardian permission yment have been receive able within 10 days of not ation in regards to CNBTA	y damages or losses, whether or no or employees any liability to the moven if having been previously adviously in print, brochures, social media on if under 18 years of age). Insural d by CNBTA Membership Co-ordinification. By signing below, I confination to the email address listed above	ot such damages or ember for such sed of the or other nce certificates will nator. Any payment rm I have read and
		Signature (Parent/Guardian's cignat	ture if under 18 ve	ars of age)		nte .
ENTLOND OF THE LINE	For CNIPTA 1/		II dildei 10 ye	a.5 51 ugc/		

Proof of DOB

Citizenship

Residency