



STUDENT MEMBERSHIP APPLICATION (2021) \$25

Full Name: _____

Mailing Address: Street: _____

City/Town: _____ Postal Code: _____

Phone Number: Home: _____ Cell: _____

Email Address: _____

Institution Name: _____

I would like to further support SPORT4ONTARIO by giving a one-time donation of \$ _____

Student Membership eligibility: For membership in this category you must **not** be in full time employment and are enrolled in degree or certificate seeking program at an accredited or recognized post-secondary institution. You must support the objects of SPORT4ONTARIO and be approved by the Board of Directors.

I, _____ hereby authorize that I am eligible for status as a **Student Member**.
Please Print Name

Signature _____ Date _____

Please complete this form and attach the following item:

- A brief statement on your personal interest and/or experience in amateur sport in Ontario.

Please attach a cheque payable to SPORT4ONTARIO and mail or drop off with your completed application form to 100-875 Morningside Avenue, Toronto ON M1C 0C7.

PLEASE NOTE WE'VE CHANGED MAILING ADDRESSES

Thank you for your valued support!