



# New Membership Form

## Group

Organization Name\*: .....

Contact Given Name\*: ..... Contact Surname: .....

Phone #1\*: ( ) ..... Phone #2\*: ( ) ..... Fax: ( ) .....

Website\*: ..... Email: .....

\*Can this information be released to interested participants? Yes  No  ..... Contact's Title: .....

Address: ..... City: ..... Postal Code: .....

Sports offered: .....

Demographic served:

- Female     Recreational     Elite     Youth     Senior
- Male     Competitive     Children     Adult     Disabled Programs

What issues affect your organization currently? .....

.....

What can ESC do to assist you? .....

.....

Is there a major issue / initiative / project that the ESC should pursue or investigate? .....

.....

How could / should the ESC benefit the entire Edmonton sport community and still offer exclusive member benefits? What should exclusive membership benefits include? .....

.....

.....

### Group Membership Fee \$75.00

I have enclosed a cheque payable to Edmonton Sport Council OR

Please charge my credit card     VISA     Mastercard

Card #: ..... Expiry Date: .....

Cardholder: ..... Signature: .....

A receipt and confirmation letter will be mailed to you after your membership application has been processed. We value your privacy. Except as authorized, contact information will be kept confidential within the Edmonton Sport Council.

Mail your completed application form to:  
Edmonton Sport Council  
P.O. Box 637 Station Main  
Edmonton, AB T5J 2K8  
Ph: (780) 497 7678    Fax: (780) 426 3634