



Membership Form

Name: _____

Address: _____

City: _____ Province: _____

Postal Code: _____ Phone #: _____

Email address: _____

Note: CAS e-news will be sent electronically so your email is important.

NCCP Certification Level: _____

Sport(s): _____

Membership fee: \$20 (good for 1 year from receipt of membership)

Voluntary self-declaration of Aboriginal ancestry:

Check one of the following that is most applicable to your Aboriginal ancestry (optional):

- Status/Treaty Non-Status Metis Inuit

Consent to communicate electronically:

We value our relationship with you as a member and would like to communicate electronically to provide information valuable to coaches. As of July 1st, 2014, the new Canadian Federal Anti-Spam Legislation prohibits us from contacting you electronically without your consent.

Please check the appropriate box below, advising us whether or not you wish to receive information electronically from the Coaches Association of Saskatchewan.

YES, I hereby consent to the Coaches Association of Saskatchewan sending me emails, newsletters, NCCP information, coaching resources, event dates, program announcements, notifications and other information via email or other electronic means. I understand that I can unsubscribe from receiving such material at any time.

NO, I do not wish to receive electronic communications from the Coaches Association of Saskatchewan.

Please include a cheque payable to:
Coaches Association of Saskatchewan
1870 Lorne Street
Regina, Saskatchewan S4P 2L7