

The annual SPRA membership is a 12-month period starting April 1 of each year. To apply for a SPRA membership, complete all pages of this form and return them with your payment to SPRA.

Please ensure you:

1. Complete the Membership Form, Voting Delegates List and DIRECTION Request Form.
  2. Payment options: Cheque payable to SPRA (GST not applicable), Visa, Master Card and PayPal
- If you have any questions regarding the above, please call 1-800-563-2555.

Active membership categories of SPRA		
1. Cities, Towns, Villages, Northern Settlements, Rural Municipalities and First Nations		
Population breakdown		# of Votes entitled to
50,001 and higher population	\$240.00	7
25,001 – 50,000 population	\$180.00	6
10,001 – 25,000 population	\$175.00	5
5,001 – 10,000 population	\$170.00	4
2,501 – 5,000 population	\$170.00	3
1,001 – 2,500 population	\$115.00	2
1 – 1,000 population	\$50.00	1
2. Provincial Recreation Associations on the Eligibility List/FSIN/MNS	\$55.00	3
3. Sport, Culture and Recreation Districts	\$105.00	6
4. Tribal Councils/MNS Regions	\$55.00	3
5. Regional and or Urban Park Authorities	\$40.00	1

Please print

Membership Name (Organization or Community):		Population (if applicable):
Mailing Address (street address, box no.):		
City:	Province:	Postal Code:

Main Contact Person:	Position held:
Telephone number:	Email (Note: Membership renewals will be sent to this email):
Voluntary Self-Declaration:	
I am of Indigenous Descent:    yes    no	

Alternate Contact Person:	Position held:
Telephone number:	Email:
Voluntary Self-Declaration:	
I am of Indigenous Descent:    yes    no	

**Saskatchewan Parks and Recreation Association  
Voting Delegates List**

The Voting Delegates List must be completed in full and submitted with your membership fees. Fill in the number of delegates that you are entitled to according to the Application Form. If your Main or Alternate Contact is a voting member, they **must** be listed on the form below.

Please note:

- Only the **'Main Contact Person'** and the **'Alternate Contact Person'** listed on this membership form will be permitted to make changes to the Voting Delegates List. You can change your Voting Delegates at any time by emailing, mailing or faxing this page - with your requested changes identified - to SPRA.

Name of Organization/Community (as it appears on the Membership Form):
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This Membership form indicates how many votes your Community/Organization is entitled to. Fill in the correct amount of names and addresses of the individuals you wish to have voting privileges.

1. Name of Voting Delegate:	
Address:	Phone number:
2. Name of Voting Delegate:	
Address:	Phone number:
3. Name of Voting Delegate:	
Address:	Phone number:
4. Name of Voting Delegate:	
Address:	Phone number:
5. Name of Voting Delegate:	
Address:	Phone number:
6. Name of Voting Delegate:	
Address:	Phone number:
7. Name of Voting Delegate:	
Address:	Phone number:

**Release of Information**

The protection of information is important to the Saskatchewan Parks and Recreation Association (SPRA). We, as an organization, are committed to protecting the private information of our members, volunteers, clients, partners and employees. SPRA collects, uses and discloses membership information in order to establish and manage a membership relationship, as well as for promotional purposes. Personal information about individual members is not distributed or posted.

On behalf of \_\_\_\_\_ (name of Organization), I agree that SPRA may use the organization name, contact information and organization description for promotional purposes.

Authorized Signature: \_\_\_\_\_

**DIRECTION Request Form**

Name of Community/Organization: \_\_\_\_\_

As a SPRA member, you are entitled to receive up to five (5) copies of DIRECTION magazine. Please complete this form indicating the names and addresses of the individuals you would like to receive the magazine and return it, along with your completed Membership Application Form, to the SPRA office. The magazine will be sent directly to those individuals you have selected to receive it. If this form is not returned, only one copy will be sent to the Main Contact Person listed on your membership form.

**Please print**

1. Name:		
Address:		
(Street/ box no.)	(City/Town)	(Postal code)
Fax:	Email:	
2. Name:		
Address:		
(Street/ box no.)	(City/Town)	(Postal code)
Fax:	Email:	
3. Name:		
Address:		
(Street/ box no.)	(City/Town)	(Postal code)
Fax:	Email:	
4. Name:		
Address:		
(Street/ box no.)	(City/Town)	(Postal code)
Fax:	Email:	
5. Name:		
Address:		
(Street/ box no.)	(City/Town)	(Postal code)
Fax:	Email:	

**Please keep a copy for your records and submit any changes in the coming year. Thank you.**

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**We kindly request your consent.**

We value our relationship with you and would like to continue to provide you with emails, newsletters, invitations, event notices, notifications and other information that is relevant to you and your business. However, on July 1, 2014, new Canadian federal anti-spam legislation came into force which will prohibit us from continuing to contact you electronically without your consent.

In order for us to contact you via electronic means, please tick off the appropriate box below advising us whether or not you wish to continue to receive information from the **Saskatchewan Parks and Recreation Association (SPRA)** electronically.

1. **Yes**

I hereby consent to the **Saskatchewan Parks and Recreation Association** sending me emails, newsletters, invitations, event notices, notifications and any other materials via email, text, social media and/or any other electronic means. I understand that I can unsubscribe from receiving such materials at any time.

2. **No**

I do not wish to receive electronic communications from the **Saskatchewan Parks and Recreation Association**.

Dated: \_\_\_\_\_

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Organization/Business: \_\_\_\_\_

Position: \_\_\_\_\_

I have authorization to bind the Organization

Signature: \_\_\_\_\_

**Please return this form with your SPRA Membership Form.**

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