

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 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.

Associate membership categories of SPRA	
1. Individuals who are interested in the objectives of the Association	\$50.00
2. Organizations interested in the objectives of the Association	\$60.00
3. Federal government departments, national organizations with departments or branch operations within the Province of Saskatchewan	\$110.00
4. Provincial government departments/institutions and crown corporations	\$110.00
5. Students of a recognized post-secondary educational institute	\$0.00

Please print

Organization or Individual's Name:		
Mailing Address (street address, box no.):		
City:	Province:	Postal Code:

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

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

Release of Information (not applicable to Individual and Student memberships)

The protection of information is important to the Saskatchewan Parks and Recreation Association. 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/Individual), I agree that SPRA may use the organization name, contact information and organization description for promotional purposes.

Authorized Signature: _____

DIRECTION Request Form

Name of Organization/Individual: _____

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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