

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.

<b>Membership Category</b>	
1. Commercial Member	\$550.00

**Please print**

<b>Organization's name:</b>		
Mailing Address (street address, box no.):		
City:	Province:	Postal Code:

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

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

**Commercial Profile** - Check off the appropriate main category and the corresponding sub-categories of products and services offered by your company.

**Arena/Ice Rink Supplies**

Arena/Skate Proof Surfaces  
Refrigeration  
Score Boards  
Seating/Benches  
Other \_\_\_\_\_

**Parks and Sports Field Supplier**

Irrigation Systems  
Maintenance Equipment and Product  
Outdoor Lighting  
Utility Vehicles  
Other \_\_\_\_\_

**Specialty Suppliers**

Architectural Design  
Construction/Engineering  
Glass  
HVAC  
Janitorial  
Lighting  
Painting  
Roofing  
Sound Equipment Vending/  
Concession  
Other \_\_\_\_\_

**Pool/Aquatic Suppliers**

Filtration and Mechanical Systems Indoor/  
Outdoor Surfaces Maintenance  
Equipment  
Pool Accessories  
Other \_\_\_\_\_

**Fitness Suppliers**

Equipment and Products  
Flooring  
Management and Consultants  
Training and Certification  
Other \_\_\_\_\_

**Release of Information**

The protection of information is important to 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.

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: \_\_\_\_\_ Date: \_\_\_\_\_

**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.**

S:\Administration\Membership Forms\Membership Forms for April 1 expiry\Associate Membership Application Form.docx

### 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.**