



The Canadian Volkssport Federation
Suite 604 - 251 Bank Street, Ottawa ON K2P 1X3

APPLICATION FOR AFFILIATE ORGANIZATION MEMBERSHIP

Application:

We the undersigned members of the Associate Organization, acting on behalf of

(Full Name of Organization)

(Full Mailing Address of Organization)

(Area Code) (Phone Number)

(Email Address)

Declaration:

We declare that, to the best of our ability, we will support and promote the goals and purposes of the Federation and any respective regional volkssport association; and furthermore, we undertake to conduct all volkssport events and related affairs in accordance with all applicable Bylaws, Rules and Regulations of the CVF/FVC, and any respective regional volkssport association and other jurisdictional authorities.

Enclosures:

Three copies of this Application for Membership.
Cheque in the amount of \$50.00 to cover annual dues.

All CVF/FCV events (walking, skiing, swimming, cycling or skating) have a \$30.00 fee levied as well as a \$10.00 insurance fee. Events must be applied for and sanctioned by the National Office.

Signatures:

Signed at _____ on _____

(Please forward in TRIPLICATE)