



INDIVIDUAL MEMBERSHIP APPLICATION

FIRST NAME: _____ LAST NAME: _____

MAILING ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

TELEPHONE: _____ FAX: _____

E-MAIL: _____

I AM A MEMBER OF THE FOLLOWING POLO CLUB(S): _____

RATINGS:

OUTDOOR: _____

INDOOR: _____

Membership Fees:

Membership to Polo Canada is valid from January 1 – December 31. Members receive discounted rates to clinics and programs; international recognition and opportunities; regular communiqués on polo and Association-related information; and more.

Polo Canada is a Registered Canadian Amateur Athletic Association (RCAAA), representing Canadian polo players and is a member of good standing with the Federation of International Polo (FIP) and the Ontario Equestrian Federation (OEF).

Adult Member - \$60+ applicable sales tax \$ _____

Junior Member - \$30 + applicable sales tax \$ _____
(Must be 21 years or younger as of Jan. 1: Date of birth: _____)

I would like to make a charitable donation to Polo Canada (A tax receipt will be issued for all donations.)	\$ _____
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TOTAL \$ _____

METHOD OF PAYMENT: Cheque (Cheque payable to *Polo Canada*)

Send your complete membership form and Payment to:

Polo Canada

180 Renfrew Drive, Suite 100, Markham, Ontario, L3R 9Z2

Telephone: 647-208-7656 Fax: 905-477-6897

Email: info@polocanada.ca Website: www.polocanada.ca