



# 2016 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: \_\_\_\_\_)

<b>I would like to make a charitable donation to Polo Canada</b> (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](mailto:info@polocanada.ca) Website: [www.polocanada.ca](http://www.polocanada.ca)