

# Comox Valley Pickleball Association






## 2018 APPLICATION FOR MEMBERSHIP

No: \_\_\_\_\_

(to December 31, 2018)

In our goal to increase membership, CVPA has created a new membership structure.

### Your membership will:

-  Help pay for new outdoor Pickleball courts;
-  Contribute to the cost of operating clinics;
-  Create credibility to go forward in applying for grants;
-  Assist in promoting CVPA;
-  Cover operating expenses including the website, newsletter, insurance, etc.

### Sponsors for Platinum Membership:

10% off The Bayside Café, Great Canadian Oil Change, Happy Source Sports, \$20 off Geek Tweaks

### Option 1: Platinum Membership: \$10

Individual Membership: You will receive sponsor discounts as noted on back of membership card.

### Option 2: Family Membership: \$10 First member, other immediate family members free

All immediate family members can join CVPA for \$10 (inclgd. husband & wife). You will receive regular membership cards without sponsor discounts on back of membership card.

Membership Type: Choose One: ✓

- |                          |   |                 |
|--------------------------|---|-----------------|
| <input type="checkbox"/> | Renewal – Individual - Platinum                       | \$10            |
| <input type="checkbox"/> | Renewal – Switch from Individual to Family membership | \$10 per family |
| <input type="checkbox"/> | New Member – Individual – Platinum                    | \$10            |
| <input type="checkbox"/> | New Member – Family Membership                        | \$10 per family |

Name: \_\_\_\_\_ M \_\_\_ F \_\_\_ Year of Birth: \_\_\_\_\_  
First Last Optional-statistics, funding, tourneys

Email: (Individual or primary family contact)

Family Members: (for Family membership, list additional family member/s below)

1 <sup>st</sup> Name	Last Name	Year of Birth	M/F	Email address if they wish to receive CVPA notifications

*(New member only OR if change in renewal contact information)*

Address: \_\_\_\_\_ BC \_\_\_\_\_  
Street Address City Postal Code

Phone No. \_\_\_\_\_