



CANADIAN BOATING FEDERATION FEDERATION NAUTIQUE DU CANADA

142 Saint-Philippe, Salaberry de Valleyfield QC J6S 3H4
Phone: (450) 377-4122 • Email: cbfnc@cbfnc.ca



CLUB APPLICATION, ENDING DECEMBER 31, 2020

CLUB NAME: _____ **CLUB E-MAIL:** _____

ADDRESS: _____
Street City Province/State Postal Code

CONTACT: Name _____ **Phone** _____ **Email** _____

BOARD:

President: _____
Email: _____ **Phone:** _____

Vice-President: _____
Email: _____ **Phone:** _____

Treasurer: _____
Email: _____ **Phone:** _____

Secretary: _____
Email: _____ **Phone:** _____

Racing Chairman: _____
Email: _____ **Phone:** _____

PAYMENT:

VISA
 MASTERCARD
 OTHER _____

CARD NUMBER

NAME

EXPIRATION DATE

SECURITY CODE

POSTAL CODE

SIGNATURE

CLUB CATAGORY: (Check all that apply)

<input type="checkbox"/> INBOARD	\$150.00	<input type="checkbox"/> OUTBOARD	\$150.00
<input type="checkbox"/> JET RIVER	\$500.00	<input type="checkbox"/> VINTAGE	\$150.00
<input type="checkbox"/> OTHER: _____		\$150	

Total Amount Inclosed **TOTAL:** _____

We hereby agree to be bound by the rules and By-Laws of the CBFNC.
IF NOTHING IS INDICATED, ALL CORRESPONDENCE WILL BE SENT TO THE PRESIDENT

Nous nous engageons à obéir aux règlements et By-Laws de la CBFNC.
SI RIEN N'EST MENTIONNE, LA CORRESPONDANCE SERA ADRESSEE AU PRÉSIDENT.

RELEASE: Signature to confirm reading and agreement of the release form on back of form. Signature confirme la lecture et l'acceptation du consentement libération (release).

Name _____ Signature _____ Date _____