

## Canadian Therapeutic Riding Association

Form registration of a new member

Please check √

Form renewal of members 1980 Form	ership U
First and last name:	Date:
Address:	City:
Province:	Postal Code:
Phone #:	Centre affiliation:
Email :	Level of instructor certification /other designation:
<b>MEMBER CATEGORIES:</b> The membership year runs from January 1 <sup>st</sup> to December 31 <sup>st</sup> . Please check which member category applies to you. (All instructors are individual members) <b>Voting Non Voting</b>	
☐ Individual member \$50.00	☐ Supporting member \$20.00
Life member \$1000.00	Associate member \$50.00
	Corporate member \$100.00
Payment information: payment information must accompany registration/renewal form. Please send a cheque or money order to: 5420 Hwy 6 North, Guelph, ON N1H 6J2. OR proceed with an etransfer at: <a href="mailto:ctra@golden.net">ctra@golden.net</a>	
Method of payment: ☐ Cheque ☐ Money Order ☐ etransfer	

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