

MEMBER CONSENT

If you consent to [PSGB] collecting, using or disclosing your personal information, please complete and return to us the following Consent. The completed Consent should accompany your membership application or be mailed to:

[PSGB]
[Insert address]
•, Saskatchewan
•

I, _____, consent to the use and disclosure of my personal information, including my name, height, sex, address, weight, competition results, and athletic participation, by [PSGB], to [PSGB]'s national and affiliated sports organizations and to third parties, for the following purposes:

- Fundraising;
- Promotion;
- Philanthropic activities; and

[Note to draft – other particulars to be inserted upon further investigation].

Name _____
(Please Print)

Signature _____

Address _____

City _____ Postal Code _____

If person is under 18, this consent must also be signed below by a parent, legal guardian or person having power of attorney.

Name _____
(Please Print)

Signature _____

Address _____

City _____ Postal Code _____