

GLISA NORTH AMERICA - MEMBERSHIP APPLICATION FORM

Name of Organization: _____

Type of Organization (check one): International Federation (Sport, Human Rights, Culture)
 International Federation (other)
 City-wide team/organization (Team St. Louis/Vancouver Pride)
 Sport Club (single sport)
 Sport Club (multi-sport)
 Associate
 Other (please describe) _____

Complete Mailing Address: _____

Phone/Fax/E-mail/Web Site Coordinates: _____

Describe briefly the mandate of your organization:

Describe briefly the membership of your organization, including approximate membership numbers: _____

Describe briefly the scope and frequency of your organization's events: _____

How long has your organization existed? ____ years

NOTE: Please attach a list of your current Executive Committee and/or Board of Directors. You may also attach any other materials you feel are appropriate.

Declaration

I declare that I am an authorized representative for the applicant organization and that the information provided in this membership application is complete and accurate.

Name of Official Representative (Please print) Signature Date

Please complete and submit this application form, along with any attachments, to GLISA North America:

By mail: 52 – 46000 Thomas Road
Sardis, British Columbia
Canada V5S 4P8

By e-mail: glisa-na.org, glarocque@shaw.ca