



Western Canada Motorsport Association
Box 76002 PRO Southgate, Edmonton, Alberta T6H 5Y7
Website: www.wcma.ca
Email – info@wcma.ca

AFFILIATION APPLICATION

| | |
|---|-----------------------------------|
| Name of Organization _____ (Must be incorporated under Provincial or Federal law.) | |
| Address _____ | |
| City _____ | Province _____ |
| Postal Code _____ | Telephone _____ |
| Fax Number _____ | Estimated Number of Members _____ |
| E-Mail Address _____ | |

By our affiliation with WCMA, we hereby agree to be bound by its Articles of Association and the competition rules of the Federation Internationale de l'Automobile, ASN Canada FIA Inc. and Western Canada Motorsport Association.

Dated this _____ day of _____, A.D., 20____, and signed by a duly authorized officer or director.

| | |
|------------------|-----------|
| _____ | _____ |
| Name | Signature |
| _____ | _____ |
| Telephone Number | Title |

Please provide the following documentation with your application

1. Copy of your club's Incorporation Certificate
2. Copy of your club's By-Laws
3. Copy of your current Corporate Registry documentation in the Province your club is registered in
4. Cheque in the amount of \$105.00 payable to WCMA (GST R130377757)

Names, Addresses & Telephone Numbers of Directors and Officers:

| |
|------------------------------------|
| PRESIDENT _____ |
| Address _____ |
| Postal Code _____ Home Phone _____ |
| Work Phone _____ Fax Phone _____ |
| E-Mail Address _____ |

| |
|------------------------------------|
| VICE PRESIDENT _____ |
| Address _____ |
| Postal Code _____ Home Phone _____ |
| Work Phone _____ Fax Phone _____ |
| E-Mail Address _____ |

| |
|------------------------------------|
| SECRETARY _____ |
| Address _____ |
| Postal Code _____ Home Phone _____ |
| Work Phone _____ Fax Phone _____ |
| E-Mail Address _____ |

| |
|------------------------------------|
| TREASURER _____ |
| Address _____ |
| Postal Code _____ Home Phone _____ |
| Work Phone _____ Fax Phone _____ |
| E-Mail Address _____ |

DIRECTOR - RESPONSIBILITY _____

Address _____

Postal Code _____ Home Phone _____

Work Phone _____ Fax Phone _____

E-Mail Address _____

DIRECTOR - RESPONSIBILITY _____

Address _____

Postal Code _____ Home Phone _____

Work Phone _____ Fax Phone _____

E-Mail Address _____

DIRECTOR - RESPONSIBILITY _____

Address _____

Postal Code _____ Home Phone _____

Work Phone _____ Fax Phone _____

E-Mail Address _____

DIRECTOR - RESPONSIBILITY _____

Address _____

Postal Code _____ Home Phone _____

Work Phone _____ Fax Phone _____

E-Mail Address _____