CANADIAN RACING PIGEON UNION INC. 261 TILLSON AVE, UNIT C TILLSONBURG, ON N4G 5X2 519-842-9771 FAX 519-842-8809



FAMILY MEMBERSHIP APPLICATION FORM

A Family Membership includes Immediate family members who are living at the same physical address and includes one adult, spouse, and any number of participating dependent children under the age of 18.

NAME (please print)	
ADDRESS	TELEPHONE:
EMAIL	
The person named above is the family members general meeting, and in whose name purcha	per who will have voting privileges at our annual sed CRPU race bands will be registered.
ADDITIONAL FAMILY MEMBERS PLEASE PRINT	
1	•
3	- -
Racing Club (if applicable) The Annual Family Membership Fee of \$75.00 is payable at the time of submitting this application.	
the terms, rules and regulations of the personal data in the CRPU PigeonPos	member of the CRPU and to abide by all of e CRPU, and to the publishing of basic st, Band Registry and Lost Bird Search e the CRPU regarding any change in my
Furthermore, I declare that I am in collaws of my municipality pertaining to	mpliance with all of the animal control by- the keeping of domestic pigeons.
Signature:	Print:
Date:	