

# JOIN US

Membership year is January 1<sup>st</sup> to December 31<sup>st</sup>.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

NEW       RENEWAL

Student \$10.00       Individual \$10.00 or  \$25.00/3 years       Family\* \$15.00 or  \$35.00/3 years

Number in Family \_\_\_\_\_

\*LIST FAMILY MEMBERS:

NAME	EMAIL (OPTIONAL)
_____	_____
_____	_____
_____	_____

PLEASE ADD ME TO THE CKNS EMAIL UPDATE LIST       YES       NO

I WOULD PREFER TO RECEIVE MY NEWSLETTER VIA EMAIL       YES       NO

I AM INTERESTED IN:  CANOEING;  KAYAKING

I AM INTERESTED IN:  Whitewater/Moving Water;  Recreational;  Touring;  Coastal;  Other, specify:  
\_\_\_\_\_

*I hereby release CKNS from all liability for injuries or damage to me (or my child) through participation in CKNS sponsored/sanctioned programs or activities.*

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_



**Canoe Kayak Nova Scotia  
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Halifax, Nova Scotia  
B3J 1G6**