

MEMBER CONSENT

If you consent to Sask Athletics 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:

Saskatchewan Athletics
2020 College Drive
Saskatoon, Saskatchewan
S7N 2W4

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

- ⌚ Fundraising;
- ⌚ Promotion;
- ⌚ Philanthropic activities; and

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