



## Membership Application Form

### Applicant Information:

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone # (Primary): \_\_\_\_\_ Phone # (Sec.): \_\_\_\_\_

Email: \_\_\_\_\_

*I am interested in furthering the aims and objectives of the Ottawa Safety Council and wish to apply for membership.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By checking this box in lieu of my signature, I confirm that I have read the above and wish to apply for Membership

### OSC Membership entitles you to:

- ✓ **Attend and Vote at the OSC Annual General Meeting**
- ✓ **Preferred CAA Membership Rates**
- ✓ **15% Discount on OSC Motorcycle Experience Rider Course and Workshops**

### Payment Information - OSC Annual Membership Fee \$10.00

- Cheque enclosed
- Paid by Cash in office: Receipt # \_\_\_\_\_
- Paid by Credit/Debit in office
- I authorize payroll deduction
- I wish to pay by Mastercard or Visa, please contact me at phone #: \_\_\_\_\_

Please return completed form to [hr@ottawasafetycouncil.ca](mailto:hr@ottawasafetycouncil.ca) or:

**OTTAWA SAFETY COUNCIL 301 Moodie Drive, Suite 103, Ottawa ON K2H 9C4**

Phone: 613-238-1513

[www.ottawasafetycouncil.ca](http://www.ottawasafetycouncil.ca)

Fax: 613-238-8744