



# BRITISH COLUMBIA POWERLIFTING ASSOCIATION

## 2010 CPU/BCPA Membership Application



Valid Jan 1st - Dec 31st 2010

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Birth Date \_\_\_\_\_ Training Facility \_\_\_\_\_

**Please print clearly** to help us keep a track of your details for record/ranking purposes.

Newsletters are now sent via email and archived at [bcpowerlifting.ca](http://bcpowerlifting.ca)

The BCPA is a small non-profit organization whose existence depends on the support of volunteers who help deliver contests and other services to the membership. Please indicate below if you are willing to assist with any of the following:

<input type="checkbox"/>	Spotting and loading at contests
<input type="checkbox"/>	Loading/transporting equipment
<input type="checkbox"/>	Officiating
<input type="checkbox"/>	Technical support (e.g. website design)
<input type="checkbox"/>	General help at contests (ticket sales, scorekeeping, expediting, music delivery, etc.)
<input type="checkbox"/>	Other (please specify):

In submitting this application for membership in the Canadian Powerlifting Union and the British Columbia Powerlifting Association, I fully acknowledge that I am subject to the following:

1. Doping control testing including out of season targeting and target testing during contests.
2. The BCPA reserves the right to test any member by doping control for a period of up to one year after the member's card is retired and/or not renewed.
3. Abide by all applicable IPF/CPU/BCPA bylaws.

Check one of the following to indicate which membership you are applying for:

<b>First time lifters (Jan 1 - Dec 31) \$50</b>	<input type="checkbox"/>
<b>First time lifters (Sept 1 - Dec 31) \$30</b>	<input type="checkbox"/>
<b>General Membership (Jan 1 - Dec 31) \$75</b>	<input type="checkbox"/>
<b>General Membership (Sept 1 - Dec 31) \$55</b>	<input type="checkbox"/>
<b>Special Olympics (Jan 1 - Dec 31) \$50</b>	<input type="checkbox"/>
<b>Special Olympics (Sept 1 - Dec 31) \$30</b>	<input type="checkbox"/>
<b>Associate Membership \$20</b>	<input type="checkbox"/>

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

Parent/Guardian (if under 18yrs) \_\_\_\_\_ Date \_\_\_\_\_

**SIGNATURE IS REQUIRED**

Certified cheque or money order payable to: BCPA

Send to: **BCPA Registrar #308 - 8675 French St., Vancouver, BC, V5P 4W5**

Tel: (604) 734 2932 [olivejoe@shaw.ca](mailto:olivejoe@shaw.ca)