

## MEMBER CONSENT

If you consent to **[PSO]** 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:

**[PSO]**  
**[Insert address]**

I, \_\_\_\_\_, consent to the use and disclosure of my personal information, including my name, height, sex, address, weight, competition results, and athletic participation, by **[PSO]**, to **[PSO]**'s national and affiliated sports organizations and to third parties, for the following purposes:

- Fundraising;
- Promotion;
- Philanthropic activities; and

**[Note to draft – other particulars to be inserted upon further investigation].**

<b>Name:</b>			
<b>Signature:</b>			
<b>Address:</b>			
<b>City:</b>		<b>Postal Code:</b>	

**If person is under 18, this consent must also be signed below by a parent, legal guardian or person having power of attorney.**

<b>Name:</b>			
<b>Signature:</b>			
<b>Address:</b>			
<b>City:</b>		<b>Postal Code:</b>	