

CSPA Affiliation Application

204 - 1468 Laurier Street
Rockland, ON
Canada K4K 1C7
Tel. (613) 419-0908
Email: Office@cspa.ca



Visit our online affiliation renewal at <http://www.cspa.ca>

Please ensure all fields are filled in correctly, and/or make any changes as required to the fields below. Email or mail this application to the address above. Please PRINT clearly or affiliation will not be processed.

CSPA Number

DZ / PSO / Club Name

Last Name

Middle Initial

First Name

APT #

Street:

City

Province

Postal Code

Country

Email Address

Home Phone

Cell Phone

Male

Female

Other

D.O.B. (M/D/Y)

English

French

Jumps In Last 12 Months

Total Jumps

Acc.FreeFall Time (h/m/s)

Malfunction(s) in last 12 Mths.

Number and Type of Injuries

Notes:

- All affiliations are returned to you by mail and/or email.
- All affiliation privileges are valid for one year.
- A fee of \$30.00 will apply to all NSF cheques.
- The following payment methods will not be accepted:
American Express, E-Transfers, and post-dated cheques.
- Affiliation fees are non-refundable.

CanPara option
Will be digital if not specified
Hard copy only
Digital copy only
Both Hard copy and Digital copy
None

Please attach fee payment: Registered Participant - \$105.00

Support your National Team! Add your voluntary contribution to your renewal fee:

\$

Payment Method:

Visa

MasterCard

Cheque

Money order

Card #

Expiry Date

CVV

Name On Card:

Total \$

I agree to abide by the rules and recommendations of the Canadian Sport Parachuting Association.

By signing this form, I acknowledge and agree to pay the amount payable to the Canadian Sport Parachuting Association (CSPA) outlined above.

Date

Signature

As a Registered Participant, I consent to receive communications from CSPA that are relevant to my affiliation, including electronic commercial messages, newsletters, reminders and updates.

initial

03/2024