



WOODSTOCK AGRICULTURAL SOCIETY 2016 MEMBERSHIP APPLICATION

Completed form and payment may be submitted at Fairgrounds office

Cheque Cash

Fee \$10 New Member Renewal

Mail to: Woodstock Agricultural Society
875 Nellis Ave, Woodstock ON, N4S-4C6
Attn: Manager, Maria Reis

Membership year Dec1-Nov30

Please Print

Name: _____

Address: _____
(Postal Code)

Telephone: _____

Email: _____

May we send reminders about upcoming events by email? Yes ____ No ____

All members are required to sign this consent form each year.

Membership Consent Form for Collection, Use and Disclosure of Personal Information – OAAS District 7

The WAS is required by Federal Privacy Legislation (PIPEDA) to have each member sign a consent form, annually, allowing the society to collect, use and disclose personal information according to specific guidelines. All information provided will remain strictly confidential within the Woodstock Agricultural Society and will not be distributed to any third party, other than those affiliates deemed necessary in the operation and business of the Society. We understand the importance of protecting your privacy and are committed to the collecting, using and disclosing your personal information in a responsible manner.

Our society will collect, use and disclose information about you for the following purposes only:

- To contact you.
- To communicate with other Agricultural Association groups (Association, District, and Societies).
- To send out pertinent information such as newsletters.
- To keep an accurate membership list.
- To comply with legal and regulatory requirements including information to the Ministry of Agriculture and Food.
- To deliver pertinent information to the insurance carrier.
- For teaching and demonstrative purposes on an anonymous basis.
- To assist this society in complying with all regulatory requirements within the law.

Member Consent: I have reviewed the above information and agree that the Society may collect, use and disclose personal information about me as set out above. I understand the members of the Woodstock Agricultural Society, including executive members, are volunteers of the Society and as such are immune from civil liability for any act or omission resulting in any personal loss, insult or injury incurred in the activities of the Society.

* Signature: _____ Date: _____

*As a member of the WAS, you are encouraged to take an active role in the function of the Society.
Please indicate below the areas in which you would be willing to assist.*

Home Show__	Fair__	Set up__	Tear down__
Parking__	Morning__	Afternoon__	As Needed__
Weekend__	Weekday__	Evening__	Community Event Booths__

Contact us

(519)-537-8212

Woodstockfairgrounds.com

Facebook.com/woodstockagsociety

Twitter.com/WdskFairGrounds