




OFSC District 1 Member Club	
KINGSTON & PEMBROKE SNOWMOBILE TRAILS ASSOCIATION	
Box 147	McDonald's Corners
Ontario	K0G 1M0
	<p><i>"Buy Where You Ride"</i></p> <p>Support Your Local Snowmobile Club Become a Volunteer!</p> 
Order Form for 2012 Seasonal Trail Permit	
Name (Registered Owner) / Please complete a separate form for each owner	
Address – Street No. & Name (P.O. Box) / As per vehicle registration	
City, Town or Village	Postal Code
Home Telephone No. ()	Work Telephone No. ()
Email Address (optional):	
V.I.N. Vehicle 1: _____	Year: _____
Make: _____ Model: _____	Licence Plate: _____
V.I.N. Vehicle 2 _____	Year: _____
Make: _____ Model: _____	Licence Plate: _____
V.I.N. Vehicle 3 _____	Year: _____
Make: _____ Model: _____	Licence Plate: _____
Date Sold M D Y	<input type="checkbox"/> Seasonal – on or before Dec. 1/11 <input type="checkbox"/> Seasonal – after Dec. 1/11
<p>By completing this order form, I understand that I am making application for the purchase of a 2012 Seasonal Trail Permit I understand that the trail permit(s) for which I am applying is valid only for the motorized snow vehicle identified in this application and is valid only where the sticker (permit) issued under this application is permanently affixed in the required position on that motorized snow vehicle. The Trail Permit provides access to trails prescribed under the <i>Motorized Snow Vehicles Act</i>. I certify that the information contained in this application is true and acknowledge and accept the responsibilities imposed by law.</p>	
<p>X _____ Applicant's Signature Note: Name and address on this application form must be the same as the name and address of the registered owner.</p>	
<p><i>Information in this form is collected under the authority of the Motorized Snow Vehicles Act and is used for administration and enforcement of the trail permit program only, unless consent to use this information for other purposes is otherwise provided by the person to whom this information relates. Direct enquiries to: MTO Supervisor, General Enquiry Unit, Licensing Administration Office, Bldg. A., 1201 Wilson Ave., Downsview, On M3M 1J8 (416) 235-2999 or 1-800-387-3445.</i></p>	

	ONTARIO FEDERATION OF SNOWMOBILE CLUBS	REQUIREMENTS & TRAIL USE INFORMATION		
<p>By signing where specified below, I would like to access applicable OFSC Benefits and Offers. The OFSC values your privacy and the protection of your personal information. By authorizing the release of the name and address information as indicated below, I consent to the OFSC's use of this information for purposes related to the mandate of the OFSC (www.ofsc.on.ca). I further understand that any information provided to the OFSC is out of the custody and control of the Ministry of Transportation and that the OFSC will have sole responsibility of the information.</p>				
Please complete the following information:				
<input type="checkbox"/> Please use the registered owner's address on the order form for the trail permit for mailing or for OFSC purposes				
<input type="checkbox"/> Please use the following name and address for someone other than the registered owner listed on the order form for the trail permit to receive mailings or for OFSC purposes				
Name (If different than registered owner previously listed)				
Address – Street No. & Name (If different than registered owner previously listed)				
City, Town or Village		Postal Code		
Home Telephone No.		Work Telephone No.		
Email Address:				
<input type="checkbox"/> Please do not send the member magazine (See reverse side for OFSC Terms and Conditions – "B")				
<input type="checkbox"/> YES, I am interested in learning about the club and/or helping out, please contact me by either by phone or email if provided.				
I have read, understood and agree to the Terms and Conditions on reverse.				
Applicant's Signature		Date		
X		M D Y		
PERMIT ORDER INFORMATION				
Permit Quantity		1	2	3
On or before Dec. 1, 2011		\$200	\$400	\$600
After Dec. 1, 2011		\$250	\$500	\$750
Club Membership				
Misc.				
Trails Donation				
Total Remittance		Canadian Funds		
PAYMENT METHOD				
<input type="checkbox"/> CHEQUE				
Make Cheques payable to K & P Snow Trails Association				