



## CLASSIC TRAIL PERMIT Order Form

**OFSC CLASSIC TRAIL PERMITS ARE AVAILABLE FOR  
"REGISTERED SNOWMOBILES 15 YEARS OLD OR OLDER"**

**Now its easy to get your Classic Permit  
Call Anne Hill permit co-ordinator for  
Almaguin District SC Ph 705 382 2795 fax 705 382 1554**

**"COPY OF VALID MSV REGISTRATION SLIP MUST BE  
PROVIDED WITH THIS ORDER FORM"**

### Complete The Following Information

#### "Buy Where You Ride"

Support Your Local Snowmobile Club and/or Become a Volunteer!

#### PURCHASER MUST NAME OFSC CLUB BEING SUPPORTED

DISTRICT #: **#11**

CLUB NAME: **Almaguin District Snowmobile Club**

### Order your 2012 Classic Permit

NAME OF REGISTERED OWNER (separate form for each snowmobile):

ADDRESS OF REGISTERED OWNER (as listed on Vehicle Registration)

City, Town or Village Postal Code

Home Telephone Work Telephone

Email Address:

Vehicle Identification (VIN) (Copy of Ownership Required)

#

YR      MAKE      MODEL     

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.

By completing this order form, I understand that I am making application for the purchase of a 2010 Classic 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 Motorized Snow Vehicles Act. I certify that the information contained in this application is true and acknowledge and accept the responsibilities imposed by law.

Note: Name and address on this application form must be the same as the name and address of the registered owner.

**Applicants Signature**

X

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.

Office Use Only: Permit #



## ONTARIO FEDERATION OF SNOWMOBILE CLUBS

www.ofsc.on.ca

### Instructions for the purchase of a Classic Trail Permit:

- 1) Print this document and complete all sections,
- 2) Use a separate order for each Classic permit required,
- 3) Identify the OFSC District and Club that you wish to support,
- 4) Provide the snowmobile VIN in section provided,
- 5) Sign at X for the Classic Permit purchase,
- 6) Sign at XX for OFSC Member Benefits,
- 7) Sign at XXX if paying by credit card,
- 8) Attach a photocopy of MSV Registration Slip for the sled,
- 9) Mail or fax the completed order form to district selected,

### Complete The Following Information

Please use the registered owner's address on the order form for the Trail Permit for mailing and OFSC Member Benefits

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 and OFSC Member Benefits

NAME (If different than the registered owner previously listed)

MAILING ADDRESS (If different than the registered owner previously listed)

City, Town or Village Postal Code

Home Telephone Work Telephone

Email Address:

Please do not send the member magazine (See reverse side for OFSC Terms and Conditions - "B")

Yes, I am interested in learning about the club and/or helping out - please contact me by either phone or email



I have read, understood and agree to the Terms & Conditions on reverse  
**Applicant's Signature** **Date: MMM DD YYYY**

### PERMIT ORDER INFORMATION

Classic Permit	<b>\$125.00</b>
----------------	-----------------

Club Membership	
-----------------	--

Club Donation	
---------------	--

Trails Donation	
-----------------	--

**Total Remittance  
Canadian Funds**

\$

### PAYMENT METHOD (check one)

Cash  Cheque  Visa  Mastercard

Name on Card:

Card Number:

Expiry Date Month: \_\_\_\_\_ Year: \_\_\_\_\_

**Credit card Authorization Signature**

X