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# CSPA EJR Revalidation (Download)

**Mail or fax to:**
300 Forced Road
Russell, Ontario
Canada K4R 1A1
Phone: 613-445-1881
Fax: 613-445-2698
Email: office@cspa.ca

Please ensure all fields are filled in correctly—mail or fax this application to the address above, in time to meet the Renewal Date.

Last Name: _____ Middle Initial: _____ First Name: _____

Membership Number: _____ Membership Renewal Date: _____ CoP Number: _____

Total Jumps: _____ Jumps in Last 12 Months _____ Exhibition Jumps in Last 12 Months _____

**Instructions to EJR Examiner:**

- Check for current CSPA Membership
- Verity that 50 parachute jumps have been performed in the 12 months immediately preceding this application, 10 of which must have been within 5 metres of target centre, not necessarily consecutive, using a parachute which meets the wing loading and performance characteristics of the main parachute intended for use on exhibition jumps.
- Submit $10.00 fee if this application is not revalidated with a membership renewal.

**EJR Examiner's Declaration:**

I have examined the pertinent documents and find them to be current and valid as required by the CSPA. Revalidation of the applicant's EJR is recommended.

Name _____ CSPA Number _____ Expiry Date _____ CoP Number _____

Ratings Held _____

Signature _____ Date _____

**FOR OFFICE USE:**

Date Received _____ Renew/Revalidation Date _____ 12/07