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TEAM OT SIGN-UP FORM

Please complete the following form and submit to msot.memberservices@gmail.com or fax to (204) 775-2340 attn Member Services. Only one form per team is required to be completed by the team leader and submitted to MSOT.

Team Leader: _____
(First Name) (Last Name)

Team Leader Email: _____ Date of Event: _____
(DD/MM/YYYY)

Name of Event: _____

Event Location: _____ Type of Event: _____
(Run, Walk, Cycle, Other)

Thank you for taking the time to sign-up a Team OT event. Team OT helps increase the awareness and promotion of occupational therapy. We look forward to hearing about your event. A board member from MSOT will be in contact with you via email shortly. Thank you!

Occupational Therapists are more than health workers; we are professionals who care about our community and about finding solutions to the problems our clients, families, and friends face.

enabling ability