



## 2020 PUBLIC MEMBERSHIP APPLICATION FORM

**Membership Fee \$73.45 (13% HST included)**

**MEMBERSHIP NO:** \_\_\_\_\_ (office use only)

**Contact Name(s):** \_\_\_\_\_

**Summer Address:** \_\_\_\_\_

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ Toll Free: \_\_\_\_\_

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

**Winter Address:** \_\_\_\_\_

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ Toll Free: \_\_\_\_\_

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

### MORE INFORMATION:

To help us serve our members better, please tell us why you are joining NOTO as a public member and what we can do for you to make your membership worthwhile.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### METHOD OF PAYMENT

Visa       MasterCard       American Express       Cheque

Credit Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Security #: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_ Date to be Processed: \_\_\_\_\_

Amount: \_\_\_\_\_

**THANK YOU FOR YOUR SUPPORT!**