



Georgian Triangle Angler's Association

PO Box 224, Collingwood, ON, L9Y 3Z5

Membership Application

New Membership

Renewal

Please fill out all applicable areas of form. **Memberships will not be processed unless this form is completed in full.** *** Membership runs from June 1 to May 31 of the following year. ***

Send cheques made payable to "Georgian Triangle Angler's Association" to the address above along with this form. Cash payments may be made in person at any regular club meeting or by dropping off at Rick's Happi Hooka in Collingwood. (All members **must have** both OFAH and GTAA memberships.)

PLEASE PRINT and Fill In ALL Boxes

Last Name: _____ First Name: _____

Address: _____ Postal Code: _____

City: _____ Email: _____

Phone: _____

Where did you learn about the club: Friend Website Fishing Show Other, (specify) _____

Type of Membership: Choose **A** or **B**

A) Complete this section to receive both OFAH and GTAA club memberships. Check applicable boxes.

Single person \$75.00 <input type="checkbox"/>		
Family (includes spouse and children under 21.) \$90.00 <input type="checkbox"/>		Office use Only
Name of spouse: _____ DOB: D__ M__ Y__		Paid <input type="checkbox"/>
Children under 21 years of age: 1) _____ DOB: D__ M__ Y__		Club Official Initial
2) _____ DOB: D__ M__ Y__		<input type="checkbox"/>
3) _____ DOB: D__ M__ Y__		
***OFAH requires DOB for all children to ensure coverage under the Federation's third party liability insurance !!!!!		
Include Digital edition of Ontario out of Doors @ \$5.95 <input type="checkbox"/>	Signature: _____	

B) Complete this section to receive GTAA club memberships only. Check applicable boxes.

I have paid my membership through association with another club (or) I have paid membership directly to the OFAH and it is currently up to date. <input type="checkbox"/>		OFAH Membership Number <input type="text"/>
Single person \$40.00 <input type="checkbox"/>		Expiry Date: _____
Family (includes spouse and children under 21.) \$45.00 <input type="checkbox"/>		Signature _____

Club Involvement check boxes below.

Supporting Member Only

I would be willing to assist / volunteer for the following club initiatives, please contact me:

Committee work

Fish Derby

Clubhouse Grounds Maintenance

Fish Hatchery work

Fundraising

Stream rehabilitation

For GTAA use only.	OFAH notified <input type="checkbox"/>	Membership card sent <input type="checkbox"/>	Email on club list <input type="checkbox"/>
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