

Membership Services

Membership Catego	ory	Please check a	II that app	oly	Type of Membership((s)			
Academic or TrainingBuilder or RenovatorConsult & DesignEngineerGovernmentInstaller	LaboratManufaMainterPlannerPrecastePrivate I	icturer nance & Service er	Pumpe Regula Supplie Other:	ator er	Primary (Single or FiMulti Member(s)StudentYoung ProfessionalAssociate (of OBOA			·	
Primary Member Contact Information * all bolded information will be listed on Membership Directory Map unless otherwise notified									
Member Name				Com	oany				
Street Address City									
Province Postal Code									
Main Phone Ext Cell Phone									
Email Website									
OOWA respects the privacy of our members. Information collected and shared on the Membership Directory may be shared with membership benefit providers in order to procure and sustain new and existing partnerships. This information will not be used for the purposes of third-party solicitation. Check here to opt out of information sharing to potential benefit providers.									
Additional Information	n								
How would you like to receive the tri-annual Onsite newsletter?									
How did you hear at	oout us?								
Administrative Contact Name					Administrative Contact Email				
Why did you join? (Sele OOWA Communicat Technical and traini Networking opportu	ions produc	ets OMemb	of commu ership Dire events dis polis discou	ectory List scounts	Enterprise discouringALS laboratory diORWC course disMark's discount	scounts (Grand & Toy Park N Fly dis OOWA Insura Other:	count	
Additional Members	Informatio	on							
Additional Member I	Vame	Email			Phone		BCIN	New?	
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Payment Information	1			,	HST Re	egistratio	n # 867325714	RT0001	
Primary; One year— \$330 + HST = \$372.90 Two year — \$660 + HST = \$745.80				Total Amount: Usa Mastercard Cheque Card Number:					
Multi-Members; One year— \$160 + HST = \$180.80/person			Expiry: CSV:						
Two year— \$320 + HST = \$361.60/person				Name of Cardholder:					
Associate — \$230 + HST = \$259.90									
Young Professional (under 30)— \$160 + HST = \$180.80 Student — Free				Signature: Date Signed:					
Proof of age is requi	red for a Yo	oung Profession	al Membe	ership, Pr	oof of Full Time Student	Status is re	equired for a St	udent	

Proof of age is required for a Young Professional Membership, Proof of Full Time Student Status is required for a Studen Membership, and a membership number is required for an Association Membership.

Submit form to: Kelly Andrews, Operations Coordinator

Email: op-coordinator@oowa.org | Fax: 1-855-905-6692 | Mail: PO Box 2336 Peterborough, ON K9J 7Y8