



The Northern Georgian Bay Association

2024 Annual Membership Registration

Name: _____ Spouse/Partner _____
 NGBA Property Location: _____ (don't know ___)
 Year-Round Mailing Address: _____
 City: _____ State/Province: _____ Postal Code: _____
 Home Phone: _____ Mobile Phone: _____ Cottage Phone: _____
 email(s): _____

MEMBERSHIP LEVELS (please note clarification of membership level criteria):

PRIMARY: \$130 US or Canadian (one Primary membership per property; registered owner/lessee or designated representative; one vote per membership, includes immediate FAMILY MEMBERSHIP*) \$ _____

ASSOCIATE: \$60 US or Canadian (businesses/friends; non-voting; all other benefits apply*) \$ _____

Businesses interested in sponsorship, please add \$60 to your Associate dues (total \$120) and submit an image (300px by 300px; JPEG; < 1MB) for our website to northerngeorgianbayassociation@gmail.com

NGBA Donation (general fund and land claim legal expenses) \$ _____
Total \$ _____

*family benefits include: the right to attend meetings, serve on committees, and receive correspondence

PAYMENT OPTIONS:

- 1) Cheques made payable to: Northern Georgian Bay Association and return to: NGBA c/o Rob Nairn, 316 Maple Ave., Oakville ON L6J 2H7 (U.S. cheque payments return to c/o Sara Mierke, 30 E Abington Ave., Philadelphia, PA 19118)
- 2) Members with a Canadian bank account may pay dues electronically through INTERAC e-Transfer Using northernngba.finance@gmail.com;
- 3) PayPal: Access through NGBA website, northernngba.ca, Membership tab, then "Join or Renew today" and login and pay through PayPal.

DEADLINE FOR PAYMENT OF DUES IS MAY 1, 2024

For questions or to submit this information electronically, please email northerngeorgianbayassociation@gmail.com

PLEASE HELP US OUT BY GOING TO northernngba.ca AND UPDATE YOUR MEMBERSHIP PROFILE!

Or, use the following page to provide us with family member and co-owner contact information.

Family/Co-Owner Contact Information

Name: _____ Spouse/Partner: _____

Co-Owner? Yes No

Year-Round Mailing Address: _____

City: _____ State/Province: _____ Postal Code: _____

Email address _____

Name: _____ Spouse/Partner: _____

Co-Owner? Yes No

Year-Round Mailing Address: _____

City: _____ State/Province: _____ Postal Code: _____

Email address _____

Name: _____ Spouse/Partner: _____

Co-Owner? Yes No

Year-Round Mailing Address: _____

City: _____ State/Province: _____ Postal Code: _____

Email address _____

Name: _____ Spouse/Partner: _____

Co-Owner? Yes No

Year-Round Mailing Address: _____

City: _____ State/Province: _____ Postal Code: _____

Email address _____