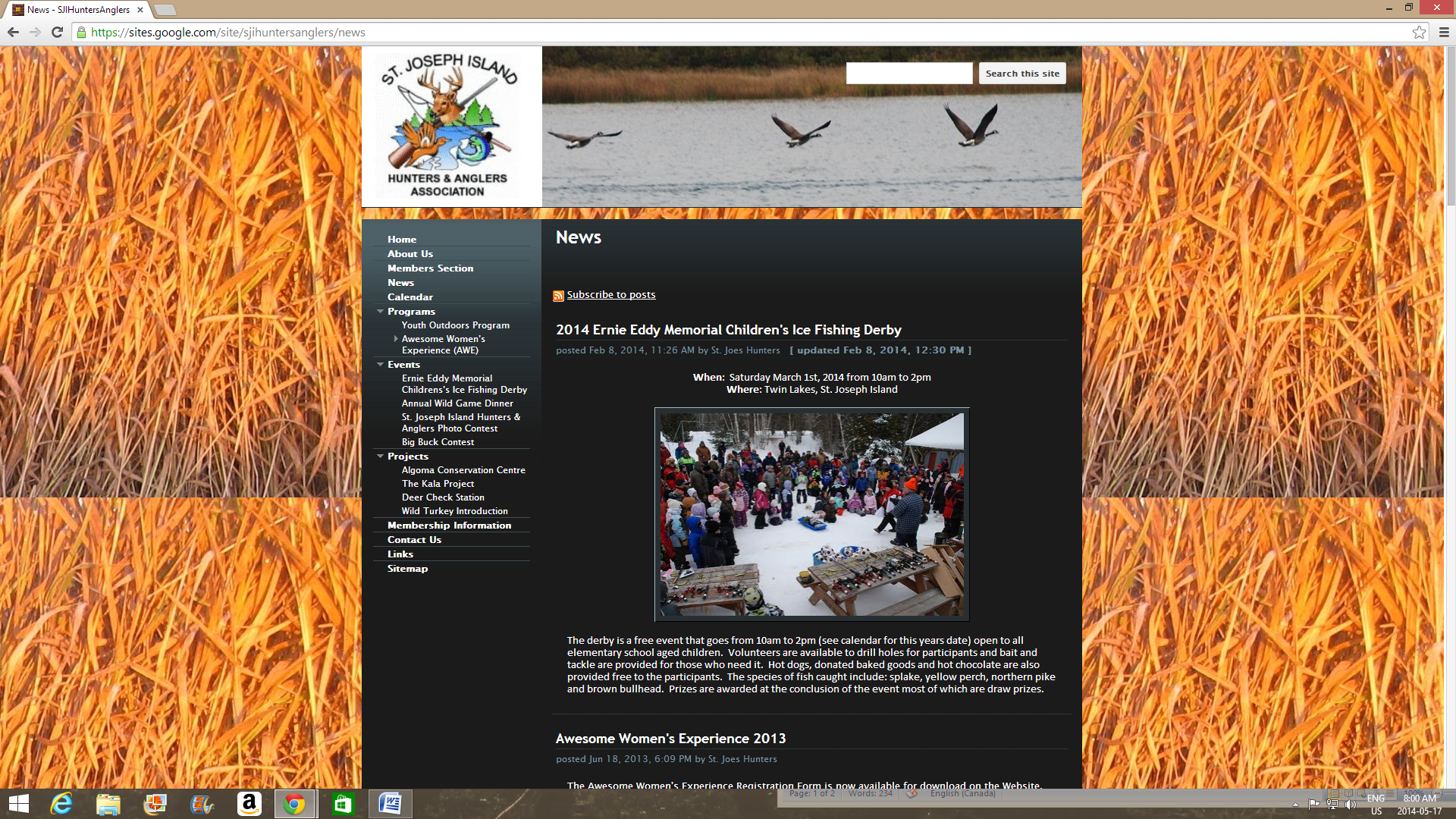
St. Joseph Island Hunters and Anglers Association Inc.



P.O. Box 41, Richards Landing, ON, P0R 1J0

Website: [**www.sjiha.ca**](http://www.sjiha.ca)

Email: [**info@sjiha.ca**](mailto:info@sjiha.ca)

**MEMBERSHIP APPLICATION FORM**

**OPTION #1**

**A single membership** includes a membership with the Ontario Federation of Anglers and Hunters (OFAH) (this is not an option)(includes 10 issues of the Ontario Out of Doors magazine)...Fee = $ 65.00

**A single membership** (electronic access only to the Ontario Out of Doors magazine)………Fee = $ 45.00

If you are currently a member of the “OFAH” through any other organization……………......Fee = $ 30.00

**OPTION #2**

**A family membership** includes a membership with the “OFAH” (this is not an option)…….Fee = $100.00

Members include husband, wife, and children up to 25 years of age.

If you are currently a member of the “OFAH” through any other organization………….……..Fee = $ 60.00

**Options #1 and #2 include insurance for all your hunting and fishing activities**

**OPTION #3**

**Youth membership** (For under 25 years of age) includes a membership with OFAH

(This is not an option and Membership does not include the magazine)…………………………..Fee = $ 25.00

\*\*NOTE: IF YOUR MEMBERSHIP HAS EXPIRED FOR EVEN ONE DAY YOU ARE NOT INSURED\*\*

All members (Option #1 and #2) are eligible for the use of the “plot-master,” and seed if available.

**NAME:** (Please print)**\_\_\_\_\_Carmen\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BIRTH DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MAILING ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**POSTAL CODE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMAIL ADDRESS:** (Please Print)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAMES AND BIRTH DATES OF ADDITIONAL MEMBERS:** (please indicate age if under 25)

**AMOUNT DUE:­\_\_\_\_\_\_\_\_\_\_\_ AMOUNT PAID:\_\_\_\_\_\_\_\_\_\_ Cheque/Cash/E-transfer(**[**info@sjiha.ca**](mailto:info@sjiha.ca)**)**

**OFAH MEMBERSHIP #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**