



MEMBERSHIP FORM

Application/recruitment



Individual / Family membership

- Individual Regular – \$35/year
- Individual Senior (65+) – \$30/year
- Family* – \$45/year
- Lifetime Regular – \$850
- Lifetime Senior (65+) – \$600

*Family Membership consists of two adults and any individuals under the age of 18.

Business membership

- Business – \$60/year This is a renewal

NFA Liability Insurance (optional)

- \$9.95/ person covered/year (\$5 million coverage)
_____ people covered x \$9.95 = \$_____
- Enclosed is a list of individuals covered (if applicable)

Donation (optional)

- Yes! I/we would like to make a donation to the NFA in the amount of :
\$_____
- one-time donation monthly donation ▼
(I consent to this amount being charged to my credit card every month until _____ MONTH / _____ YEAR)

Call To Arms Recruiter (if applicable)

Recruiter's NFA member ID : _____

Applicant's information

INDIVIDUAL/FAMILY MEMBERSHIP

Full Name: _____

BUSINESS MEMBERSHIP

Business Name: _____

Contact name: _____

Address: _____

City: _____

Province: _____ Postal Code: _____

Phone: _____ Fax: _____

Email: _____

Payment Information

Total Payment: \$ _____

Cheque or Money Order (enclosed) Visa Mastercard AMEX

Card #: _____

Name on card: _____

Exp. date: MM / YY CVV Code (3 digits on back of card) : _____

Signature: _____