Temiskaming Angler & Hunter Association c/o Membership Rep. Box 151 New Liskeard, ON P0J 1P0



Membership Application

Name: (print)			
Mailing Address:			
Home Phone:	Work:	Cell:	
Email:			
Interests or Concerns:			
TAHA Fee Structure:			
Ontario Federation	O .	ation (TAHA) is affiliated wi OFAH). If you wish to becor er of OFAH.	
Family Membership Youth with magazing	o – OFAH (\$49.55)+TA ne – OFAH(\$34.90)+TA	HA(\$11.45) = \$50.00 HA(\$10.45) = \$60.00 AHA(\$1.60) = \$36.50 ΓΑΗΑ(\$1.90)= \$11.50	
Total paid		\$	
	lual under 21 years of a	age (provide date of birth	
For a family membership pand date of birth.	elease provide spouse's	name and children's (under	21) name
If you are already a member information.	er of OFAH, you must p	provide TAHA with the follo	wing
OFAH Member #	Expiry (mm/c	dd/yyyy)://	
Date:			