

First and Surname:

Date of Birth:

## Canadian Hydroponic Association

## **Membership Application**

	Please fill out all the	required	information	and sign	at the bottom.
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Address:					
Email:					
Phone Number:					
Business Name:					
Type of Business:					
Please send the completed application by mail, along with the \$250.00 (Cash or					
Cheque) Application fee to:					
Attn: Canadian Hydro <mark>po</mark> nics Association (FIN)					
PO B <mark>ox</mark> 3054					
Spring <mark>da</mark> le, NL					
AOJ 1TO					
If you would like to send in your Application and Fee Electronically, you can email and E-Transfer to:					
<u>canadianhydroponics@outlook.com</u>					
• •					
You will need to create an answer and password, the password will be:					
Canhydro					
Signature : Date:					



## Canadian Hydroponic Association

