

First Nations Health Managers Association Association des gestionnaires de santé des Premières Nations

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Name:		□Mr. □Ms. □	□Mr. □Ms. □Mrs. □Dr. Designations:		
Home Address:	City:	Pro	ovince:	Postal Code:	
Home Phone:	Mobile:		Home Email:		
Organization Name:		Position:	Position:		
Organization Address:	City:	Pro	ovince:	Postal Code:	
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FNHMA Membership Directory: Joining FNHMA's Membership Directory allows you to network and share best practices with fellow First Nations Health Managers from across the country. Would you like your primary address listed in our online members only Membership Directory?* TYES NO * Please note that if neither option is chosen the default option will be to have your information included.					
Type of Membership: Candidate Member Corporate - Individual Associate Member For other Corporate categories of membership contact the Executive Director				Membership Fee: ☐ \$175.00 ☐ \$175.00	
Total Membership Fee with taxes included: Tax is based on your province of residence. Please select one:					
□ QC, AB, SK, MB, BC, NWT, NV, YK (5% GST added) \$183.75 □ PEI, (with 14% HST added) \$199.50 □ ON, NB, NFLD, (with 13% HST added) \$197.75 □ NS, (with 15% HST added) \$201.25 □ GST/HST exempt (no tax added) \$175.00 Please include proof of tax exemption at time of application (A letter of exemption from your employer and/or a copy of your status card – you must have an on-reserve mailing address) □ I have enclosed a cheque payable to "FNHMA" □ Visa □ MasterCard					
Card Number:	Expiry Date:	Signature:			
Name on Card:		/	Amount Paid:		

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