

2020/2021 Associate Membership Form

Legal	First Name and Middle	Initial:	
Last I	Name:		
Maili	ng / Civic Address:		
Town			Postal Code:
Home Phone:		Ce	ell Phone:
E-ma	il:		·
Lobst	ter License Number(s): _		
Home Port: Vessel Name:			
VRN:			
Com	pany Name (if applicable	e):	
	Coldwater Lobster Association Membership Dues		
	Dues:	\$260.00	PLEASE NOTE: membership is valid for one year (April 1 - March 31, 2021) You Can Now Pay Online!
	HST:	\$39.00	
	Science Research	\$75.00	
	Total:	\$374.00	
	e note: Associate memb		ote at the Annual General Meeting. Cash USA/Mastercard
mem www	bership online by going coldwaterlobster.ca	to our webpage un f you choose to pay	rm on our website to allow members to renew their der the Membership header: by cheque, please make cheque payable to
	water Lobster Association wing address:	on and mail the mer	nbership Form along with your payment to the
368 Main Street Suite 105 Lovitt Plaza			

Yarmouth, Nova Scotia, B5A 1E9