



OHA Application for General Membership

Name: _____

Address: _____

City: _____ Province: _____

Postal Code: _____

Telephone: _____

Email: _____

General Membership: \$33.90 (\$30 + \$3.90 HST)

Please make cheques payable to:

**The Ontario Herbalists Association
P.O. Box 167, 412 Roncesvalles Avenue,
Toronto, ON M6R 2N2**

- I would like information about becoming a professional or student member.
- Please sign me up for the OHA newsletter
- Please do not contact me about any other events or opportunities.

Privacy:

All information is collected for the purposes of the OHA only. We do not sell or otherwise release any information without your specific approval. From time to time, we contact members regarding OHA events and opportunities. If you would prefer not to receive these communications, please check the box indicated on the application form.