

## 2018-2019 MEMBERSHIP APPLICATION FORM

Please submit this completed form by mail with your \$20 payment to:

*Community Radio Fund of Canada  
130 Albert Street, Suite 606  
Ottawa, Ontario K1P 5G4*

<b>Legal Name</b>		
<b>Type of Organisation</b>	<input type="checkbox"/> Community radio station <input type="checkbox"/> Campus radio station <input type="checkbox"/> Association	
<b>Call Letters</b>	<b>Frequency</b>	<b>Watts</b>
<b>Website</b>		<b>Email</b>
<b>Business Address</b>		
<b>City</b>	<b>Province</b>	<b>Postal Code</b>
<b>Mailing Address (if different)</b>		
<b>Representative Name</b>		<b>Title</b>
<b>Phone</b>	<b>Email</b>	
<i>I certify that the information given on this form is, to the best of my knowledge, true and complete.</i>		
<b>Signature</b>		<b>Date</b>