



Allied Member Application Form

April 1, 2009 to March 31, 2010

Business Name: _____

Business Address: _____

Mailing Address: _____

Phone Number(s): _____

Fax Number: _____

Website Address: _____

Email: _____

Contact Name(s) 1. _____ 2. _____

Membership Fees

Please select a membership level:

Sponsor - \$225

Ambassador - \$275

Champion - \$350

Please add 5% GST

Business Description

Please send a 60-word description of your business and a logo (jpeg format) to lakesuperior@nosta.on.ca. This description will be used on the NOSTA website to advertise your business.

Discount Program

Market your special offers on our website and e-newsletters to fellow NOSTA members.

If you would like to take advantage of this great member-to-member discount program, please describe your offer below. If you would like to add an offer at a later time, or change your offer, please contact NOSTA at lakesuperior@nosta.on.ca or by telephone at (807) 346-1132.

Payment Information

Membership fee: \$_____ + 5% GST

Cheque enclosed Credit Card Payment* Please send invoice

**To pay via Credit Card please call (807) 346-1132*

Signature _____

Please send the completed & signed application to:

FAX: 807-346-1135

or Mail:

*North of Superior Tourism Association
920 Tungsten St, Suite 206A, Thunder Bay, Ontario P7B 5Z6*

Thank you