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## Application for Organization or Corporate Membership One-time Fee: \$300.00

Company Name:
Company Name:  Please print name of partnership, company, organization, or association in full
Name of individual company contact:
Address:
City/Town:
Postal Code:
County/Region:
Phone:
Email:
Nature of business:
Date:
Payment enclosed or Please send an invoice
Submit completed form to the Ontario Agricultural Hall of Fame office by mail, fax or email (contac information above).