



Nova Scotia Prospectors Association

Application for Membership

Date of Application: _____ For Membership year: _____

PLEASE PRINT CLEARLY - ESPECIALLY E-MAIL ADDRESSES!!! IF YOUR E-MAIL ADDRESS IS NOT LEGIBLE, YOU WILL NOT RECEIVE ANY E-MAILS FROM THE NSPA!!!!

Name: _____

Family Member: Name/s _____

Mailing Address _____

City: _____ Province: _____

Postal Code: _____ Phone: _____ Fax: _____

Cell Phone : _____ E-Mail _____

DUES _____

(**Note: Membership year is Jan 1 - Dec 31**)

Annual Membership = \$30.00 Family Membership (age 18+) = \$35.00 Full-Time Student Membership = \$10.00

Please make your payment payable to:

Nova Scotia Prospectors Association

Mail To:

Carol Blakeney 210 Willett St., Apt 908 Halifax, Nova Scotia B3M 3C6

Received BY: _____ Amount: _____

For Membership in the Nova Scotia Prospector Association

Date: _____ Time: _____

Signed by NSPA Representative: _____