



# Renewal Application NLMTA 2020-2021

Please fill out and return to:

NLMTA

P O Box 23212 Churchill Square,

St. John's, NL A1B 4J9

FAX # 709-895-7767

ACTIVE  INACTIVE

*If applying for **active** membership, please list your home address and the business address of any clinics that you practice in.*

*If applying for **inactive** membership, just fill in your home mailing address.*

1) Your Name \_\_\_\_\_

2) Primary Workplace Name \_\_\_\_\_

Home Address \_\_\_\_\_

Bus. Address \_\_\_\_\_

Town/City \_\_\_\_\_

Town/City \_\_\_\_\_

Province \_\_\_\_\_

Province \_\_\_\_\_

Postal Code \_\_\_\_\_

Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Bus. Phone & Fax \_\_\_\_\_

***Please list email address in BLOCK LETTERS only if not receiving emails.***

Please send my mail to the following address: 1) \_\_\_\_ 2) \_\_\_\_

YEAR JOINED NLMTA \_\_\_\_\_ REG. # NL# \_\_\_\_\_

Please put an X below for the following: **I would like to see Jobs/Upcoming Courses via:**

1) Email \_\_\_\_\_ at \_\_\_\_\_ AND/OR

2) Facebook Page \_\_\_\_\_

I am interested in being nominated for an executive position: \_\_\_\_\_

Want to get involved? Please indicate your area of interest below If interest is indicated – expect to be contacted and asked to contribute			
WEBSITE	PUBLIC RELATIONS	CONTINUING EDUCATION	RESEARCH

I, the undersigned, understand that the application for renewal cannot be accepted unless it is completed and accompanied by full payment. Membership will lapse in the NLMTA and CMTNL, including liability insurance, if the application AND payment is not **RECEIVED by Midnight September 30, 2020.**

**INCOMPLETE RENEWAL APPLICATIONS WILL BE RETURNED.**

**E-TRANSERS will not be processed if the renewal application isn't received.  
Late Charges will apply.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Please enclose payment (NO CASH) with your membership renewal form:*

- Visa/Mastercard/E-Transfer – please complete table below
- Cheque or money order – made payable to the NLMTA

Fees	Type of Membership	Deadline
\$50.00	Inactive	All Year
\$250.00	Active	Received by midnight September 30 <sup>th</sup>
<b>RENEWAL APPLICATIONS RECEIVED AFTER SEPTEMBER 30, 2020 WILL BE SUBJECT TO A \$75.00 LATE FEE FOR EACH SUBSEQUENT MONTH FEE IS LATE. THE CMTNL WILL BE NOTIFIED OF LAPSE IN MEMBERSHIP AND MEMBERSHIP WILL BE REVOKED</b>		

**\*\*\* YOUR INVOICE INCLUDED IN YOUR RENEWAL PACKAGE SERVES AS YOUR RECEIPT. KEEP IT FOR YOUR PERSONAL/ INCOME TAX RECORDS.\*\*\***

Payment Option	Card Number	Expiry	3 Digit CCV (back of card)
VISA			
MASTERCARD			
E-TRANSFER	Email to <a href="mailto:nlmta@nlmta.ca">nlmta@nlmta.ca</a> (with answer 2020NLMTA)		

**What EMAIL is associated with your e-transfer:**

**HELP MAKE IT EASIER FOR PAT:** It is very important that you let us know if your email associated with your online banking is different than the main contact email we have on file. Otherwise Pat won't know who you are!