



THE NIAGARA ANTIQUE POWER ASSOCIATION
MEMBERSHIP APPLICATION AND PRIVACY PROTECTION CONSENT FORM

MEMBERSHIP INFORMATION

NAME OF APPLICANT..... SPOUSE
FAMILY MEMBERS.....
ADDRESS.....APT/RM#.....
CTY/TN/VIL..... ST/PRO..... POSTAL/ZIP CODE..... COUNTRY.....
HOME PHONE # - CELL PHONE # -
E-MAIL ADDRESS.....

PLEASE COMPLETE THE FOLLOWING QUESTIONS:

MAY WE PLACE YOU ON THE MAILING LIST TO RECEIVE A NEWSLETTER... YES..... NO....
MAY WE PLACE YOU ON OUR PHONING LIST YES..... NO.....
I AGREE THAT THE EXECUTIVE AND HEADS OF DEPARTMENTS MAY HAVE MY PHONE # YES..... NO.....

MEMBERSHIP FEE'S: MEMBERS \$15:00 COUPLES \$25.00 FAMILY \$30:00 TOTAL \$
(CHILDREN UNDER 13 ARE FREE) (FAMILY FEE ONLY APPLIES TO MORE THAN TWO CHILDREN OVER AGE 14)

PRIVACY PROTECTION INFORMATION

PRIVACY NOTICE TO MEMBERS

Niagara Antique Power Association has developed a Privacy Policy in compliance with the Federal Governments Personal Information Protection Act.

We would like to inform you about the personal information that we collect, how it is used, how we may disclose it, and your rights with respect to this information.

The nature of the personal information we collect:

- The only information we receive from you is your Name, Address, Telephone number and E-mail address.

Niagara Antique Power Association uses the information we collect for the following:

- To communicate with you from time to time about meetings, events and other operations of N.A.P.A

Niagara Antique Power Association may disclose your information:

- If we require a third party to provide services to us (eg. Lawyers, accountants, or other professionals)
- To meet legal or regulatory requirements.
- To other organizations with activities similar to N.A.P.A

Access to your personal information:

You have the right to request your personal information we have collect.
You also have the right to withdraw any of your information from our database.

I am aware that N.A.P.A has a Privacy Protection Policy and that a copy is available to me on request.

Member _____

Witness _____

Date _____