



Co-operative Housing
Federation of Canada

Associate Application

Thank you for your interest in becoming an associate of the Co-operative Housing Federation of Canada (CHF Canada). Please complete this form and return it to members@chfcanda.coop. If you have any questions, contact us at the same email address or call 416-366-1711 ext. 251.

Note:

Associates are not Members of CHF Canada and do not have the right to vote or hold office.

Eligibility Criteria:

Select the category that you are applying for; (mark with an X)

Organizational Associate _____

Organizational Associates are of national or regional prominence who lend strong support to CHF Canada with a purpose to serve and support housing co-operatives.

Individual Associate _____

To be eligible as an Individual Associate, you:

- Have been awarded and designated as an **Honorary Life Associate** by the CHF Canada Board.
- Are maintaining the **Co-operative Housing Management Accreditation**.
- Have demonstrated long-term involvement and commitment to the co-operative housing sector.

Contact Information

Name of Organization or Individual: _____

Mailing Address: _____



Unit or Suite #:

City: _____ Province: _____ Postal Code: _____
Phone: _____ Email: _____
Website: _____

For Organizational Associate Only:

Primary Contact Person: _____
Position: _____ Phone: _____
Email: _____

Your Interest:

Please describe yourself or organization:

Why would you like to be an Associate of CHF Canada?

Invoice Payment:

CHF Canada will send you an invoice upon approval of your application. Payment is due on receipt.
I have read and understand the above

Signature

Date