

# OMMA Membership Form

\$30 new members

\$20 to renew

Name:
Address:
Postal Code:
Phone #:
Email Address:
Date:
Interested in Volunteering?
Days:                      Evenings:                      Weekends:

**\*Please note the change in address for membership renewal\***

Please print carefully and send the completed membership form along with a cheque payable to **OMMA** to the address shown below:

**OMMA** Membership  
c/o NCAC  
35 Stafford Road  
Ottawa ON K2H 8V8