



Membership Profile Form 2018

A. Member Information:

Building/Organization Name: _____

MTCC / TCHC / TSCC # (if applicable): _____ # of Units: _____

Building Address: _____

Billing Address (if different from Building Address): _____

Member Category (please mark one only with an x):

a. Full (voting) Members: **2018 fee is \$2.75/unit to a maximum of \$375.00 per building*

Association of Freehold Homeowners

For-Profit Rental Building

Condominium Corporation

Private Non-Profit Rental Building

Co-Operative Housing

Toronto Community Housing Corp. Building

b. Associate (non-voting) Members: **2018 fee is \$30*

B. Primary Contact Person for Official SLNA Communications:

Position (ie. President/Secretary): _____

Name: _____

Mailing Address (if different from Building Address): _____

Telephone: _____

Email: _____

C. Delegate(s) Profile: Full Voting Members Only

Delegates are appointed or elected by the Board of Directors or membership of each Member Group. The number of voting Delegates is based on the number of units in your Building, to a maximum of 3. Please indicate the number of units in your Building from below and provide contact information for EACH of your Delegates:

1-50 units = 1 Delegate

51-100 units = 2 Delegates

101+ units = 3 Delegates

Delegate #1: (check here if same as Primary Contact Person above)

Name: _____

Mailing Address (if different from Building Address): _____

Telephone: _____

Email: _____

Delegate #2:

Name: _____

Mailing Address (if different from Building Address):

Telephone: _____

Email: _____

Delegate #3:

Name: _____

Mailing Address (if different from Building Address):

Telephone: _____

Email: _____

D. Signature of Primary Contact:

Date: _____

Signature: _____

Data collected on this form will remain confidential to the SLNA Board and will be used only for communication connected to the objectives of the SLNA.