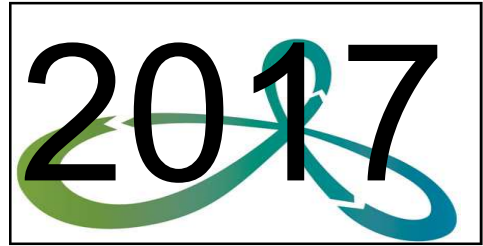


Municipal Waste Association

MUNICIPAL MEMBERSHIP INFORMATION

(1)



Name of Municipality		Population	
Address			
Postal Code/Zip Code		Website:	

Main contact*

Position

Telephone:

Fax:

Email:

*This is the person who is considered your **designated representative**. This person will receive member correspondence, including ballots for voting, will be added to the MWA Bulletin email list for Member Inquiries and all other bulletins, and will receive the MWA newsletter, *For R Information*, by mail (or via email - see below).

IMPORTANT!!!

I authorize MWA to add our various municipal contacts to its email and bulletin lists:

Signed: Name in print:

I prefer to receive the newsletter via email (pdf)

Please note: you can give us this information online (and pay directly) by going to the following web link:

<http://www.municipalwaste.ca>

Contact people for specific departments.

(2)

These are the contacts that will appear in the MWA members directory.
(We realize that not everyone will have all these programs or separate staff for each service. Just write "N/A" next to "Name" as appropriate.)

Please **print carefully!**

Recycling collection contact

Name:
Email address:
Phone Number:

Recycling processing contact

Name:
Email address:
Phone Number:

Organics contact

Name:
Email address:
Phone Number:

MHSW contact

Name:
Email address:
Phone Number:

Electronic waste contact

Name:
Email address:
Phone Number:

Promotion & Education contact

Name:
Email address:
Phone Number:

Committees

If you have staff who are interested in serving on one of the MWA committees or the Landfill Issues Forum, please indicate which staff and which committee (*name, email and phone number*) and the information will be passed to the committee chair.

Markets, Operations and Contracts Committee—Name:
Email address: Phone Number:

Organic Waste Diversion Committee—Name:
Email address: Phone Number:

Municipal Household or Special Waste Committee—Name:
Email address: Phone Number:

Promotion & Education Committee—Name:
Email address: Phone Number:

Multi-Residential Committee—Name:
Email address: Phone Number:

Landfill Issues Forum—Name:
Email address: Phone Number:

Please note: you can give us this information online
by going to the following web link:

<http://www.municipalwaste.ca>

Municipal Waste Association

MUNICIPAL MEMBERSHIP

(3)



Staff affiliates

Name of municipality:

.....

To help your staff stay informed this year you can add named Municipal Affiliate Members who will receive the MWA newsletter and relevant email MWA Bulletins (\$25 each).

Please add the following as **Municipal Affiliate Members (\$25 each)**:

1/. Name:

Address if different from main address:

.....

If newsletter is preferred by email please add email address here:.....

2/. Name:

Address if different from main address:

.....

If newsletter is preferred by email please add email address here:.....

3/. Name:

Address if different from main address:

.....

If newsletter is preferred by email please add email address here:.....

4/. Name:

Address if different from main address:

.....

If newsletter is preferred by email please add email address here:.....

5/. Name:

Address if different from main address:

.....

If newsletter is preferred by email please add email address here:.....

Please photocopy an extra page if you need it

Municipal Waste Association 2017 MUNICIPAL MEMBERSHIP

Early bird INVOICE

(Rates apply if paid before January 31, 2017)

Name of municipality:

Population up to 5,000	\$100.00 + \$13 HST
5,001-10,000	\$190.00 + \$24.70 HST
10,001-50,000	\$365.00 + \$47.45 HST
50,001-100,000	\$520.00 + \$67.60 HST
100,001-200,000	\$615.00 + \$79.95 HST
200,001-500,000	\$705.00 + \$91.65 HST
500,001-750,000	\$1045.00 + \$135.85 HST
more than 750,000	\$1145.00 + \$148.85 HST

**Keep your staff in touch with MWA
Municipal Affiliate Memberships.**

Remember, to help your staff stay informed this year you can add named Municipal Affiliate Members who will receive the MWA newsletter and relevant MWA Bulletins (\$25 each).

Early bird Membership Fees Jan 1/2017 to Dec. 31/2017

Core Municipal Membership fee (see above) :

Municipal Affiliate Members @\$25 each X 25 =

Subtotal

(Please add 13% HST to the subtotal amount above)

Total \$

I am paying by cheque

I am paying by electronic funds transfer (use our form or yours)

I am paying via credit card

HST# 87339 0074 RT0001

CREDIT CARD PAYMENTS: Please complete the credit card information below and fax it in or send your cheque and a copy of this invoice to: The Municipal Waste Association, PO Box 1894, GUELPH, ON N1H 7A1 Canada

**Questions?
Call the MWA office at
(519) 823-1990
Paying by credit card?
Fax to 519-823-0084**

Visa Master Card

_____ **Cardholder's name** _____ **Credit card number** _____ **Expiry date**

Security number _____ **Cardholder's signature:** _____

Municipal Waste Association 2017 MUNICIPAL MEMBERSHIP INVOICE for payments AFTER January 31, 2017

Name of municipality:

Population up to 5,000	\$105.00 + \$13.65 HST
5,001-10,000	\$200.00 + \$26.00 HST
10,001-50,000	\$385.00 + \$50.05 HST
50,001-100,000	\$545.00 + \$70.85 HST
100,001-200,000	\$645.00 + \$83.85 HST
200,001-500,000	\$740.00 + \$96.20 HST
500,001-750,000	\$1100.00 + \$143.00 HST
more than 750,000	\$1200.00 + \$156.00 HST

**Keep your staff in touch with MWA
Municipal Affiliate Memberships.**

Remember, to help your staff stay informed this year you can add named Municipal Affiliate Members who will receive the MWA newsletter and relevant MWA Bulletins (\$25 each).

**Membership Fees Jan 1/2017 to Dec. 31/2017
Core Municipal Membership fee (see above) :**

HST# 87339 0074 RT0001

.....
Municipal Affiliate Members @\$25 each

..... X 25 =

Subtotal

(Please add 13% HST to the subtotal amount above)

Total \$

I am paying by Cheque

I am paying by electronic funds transfer (use our form or yours)

I am paying via credit card

**CREDIT CARD PAYMENTS: Please complete the credit card information below and fax it in or send your cheque and a copy of this invoice to: The Municipal Waste Association,
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(519) 823-1990
Paying by credit card?
Fax to 519-823-0084**

Visa Master Card

Cardholder's name Credit card number Expiry date

Security code _____ Cardholder's signature: _____