Suite 615, 100 Park Royal South
Skwxwú7mesh Traditional Territory
West Vancouver, BC V7T 1A2
www.ahma-bc.org

T: 604 921 2462 TOLL-FREE: 1 888 921 2462 F: 604 921 2463



MEMBERSHIP APPLICATION FORM

By submitting this completed form, we are requesting to become a Member of the Aboriginal Housing Management Association (AHMA) in accordance with its Constitution and Bylaws.

Our application is for the following membership types:

□ CORPORATE MEMBERSHIP

Corporate Members must be societies that:

- a) are in good standing with the Registrar of Companies.
- b) manage off-reserve Indigenous housing or provide Indigenous housing-related services.
- c) receive ongoing funding or loans from or through AHMA, or are, under their constitution or bylaws or by contractual agreement with AHMA, obligated to require the AHMA's involvement or approval in respect of management and administration of Indigenous housing, programs, and Indigenous housingrelated services that they manage or provide, and
- d) do not have substantially the same board of directors as that of an existing Corporate member of the Society.

NON-CORPORATE MEMBERSHIP

Non-Corporate members shall be such persons (which may be incorporated organizations or natural persons) that:

- a) are in good standing with the Registrar of Companies.
- b) are actively involved with the provision of off-reserve Indigenous housing or who provide services or ancillary programs related to Indigenous housing.
- c) apply to the directors, and are determined by the directors, in their discretion, to be deserving and entitled to become a Non-Corporate member based on the criteria set out in AHMA's Bylaws.

NOTES:

- a) Members must provide proof of "In Good Standing" with the Registrar at any time if requested.
- b) Once we receive your application, it will first be reviewed by the Executive Leadership Team. If approved, it will then go to Náca?mat Lelam Committee and then the Board of Directors for final approval.

APPLICANT INFORMATION

Name
Contact
Title



Phone	Mobile	
Email		
Address		
mmary of yo	ete your Application for Membership with AHMA, please provide us with a bri organization, including history, values, goals, and an overview of the services immunity. Please attach a separate sheet if necessary.	
	amount our organization is mandated and dedicated to Indigenous offand services is%. ***	
ited this	day of , 20 .	

Please send the completed application form to: business@ahma-bc.org

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