



# Nova Scotia Trails Federation User Group Member Application Form



Organization Name: \_\_\_\_\_

Organization Purpose: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town/City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Province: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Facebook: \_\_\_\_\_ Twitter: \_\_\_\_\_

Instagram: \_\_\_\_\_ YouTube: \_\_\_\_\_

**By signing below you acknowledge that you have read and accept the Nova Scotia Trails Federation's Risk Management Policy.**

**Name of Chair/President (print):** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** Home \_\_\_\_\_ Cell \_\_\_\_\_

**Treasurer (print):** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Email** \_\_\_\_\_

**Phone:** Home \_\_\_\_\_ Cell \_\_\_\_\_

Have you included the following in your application?

(CHECK LIST)

- Brief description of your organization and reason for applying
- Annual Fee (\$200 + \$30 HST for a total of \$230)
- Nova Scotia Registry of Joint Stock Registration Number: \_\_\_\_\_
- Proof of General Liability Insurance with NS Trails added as an additional insured

**Submit this form to:**

NS Trails  
5516 Spring Garden Road  
4<sup>th</sup> Floor Halifax, NS B3J 1G6  
[vanda@novascotiatrials.com](mailto:vanda@novascotiatrials.com)

NS Trails gratefully acknowledges the support of:



<b>For Office Use Only</b>
Date Received: _____
Date Approved: _____