

**Ontario Forensic Investigators Association
Membership Application**



New Renewal

Service/Organization _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Fax: _____

Primary Contact Person: _____ Rank/Title: _____

Email: _____

All personnel of a Member Agency are deemed to be part of the membership. Please provide contact information for up to 5 members of your Forensic Unit/Section:

Name	Rank/Title	Email	Phone #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I have read and agree to the terms of the Ontario Forensic Investigators Association Charter
(http://www.ofia.ca/page_3_6.html)

Name/Rank Signature Date

Email completed application form to: Membership@ofia.ca

Annual Membership Fee - \$200.00

Cheque: ____ PayPal (Visa, MasterCard, Amex): ____

Online payment can be made at: http://www.ofia.ca/payment_17.html

Cheques payable to: *Ontario Forensic Investigators Association*

Please mail cheques to:

**Ontario Forensic Investigators Association
c/o Peel Regional Police - Duty Inspector's Office
ATTN: Inspector Todd Christie #1959
7150 Mississauga Road
Mississauga, ON
L5N 8M5**