

PLEASE PRINT
THE COMPLETE

The Ontario Goat Milk Producers' Association Membership Application and Consent Form



Farm Name: (Please Print) _____

Name: (Please Print) _____

Address (Please Print) _____ Postal Code: _____

Phone: _____ Fax Number: _____ E-Mail: _____

Internet Access: None
 High Speed
 Dial Up
I use a PayPal Account Yes No

Mail my copies of the *Pipeline* Send my Electronic copies of the *Pipeline*
to the above address instead of mailed hard copies

Full Membership: (licensed Ontario Shipper) (Check Type of Membership) Associate Membership (Non Voting)
Shippers License # _____ Annual Fee: ___\$35.00 Inside Canada
Fee (Annual): \$35.00 _____ \$50.00 Outside of Canada

Please make cheques payable to OGMPA and send along with this completed application.

What Breed(s) of Goats do you have? (Check appropriate Breeds)

Alpine Saanen Toggenburg Lamancha Nubian Mixed

Consent for the Collection, Use and Disclosure of Information As per the *Personal Information Privacy Act*

Please be advised that the information you have provided on page one is subject to the Personal Information and Privacy Act.

Application to the Ontario Goat Milk Producers' Association, certain personal information will be collected, used and disclosed on your behalf.

This personal information will be protected in accordance with the procedures and Privacy Policy of the OGMPA. Personal information collected, used and disclosed is mainly for the purposes of enabling the OGMPA to inform you on matters which provide benefits to you.

In addition, your information may, with consent, be published to other members in a membership list, or for the purposes of research and development. As well, your information may be disclosed to any other party authorized to request this information (i.e. A government agency).

By signing this form, you are consenting to such collection, use and disclosure of said information.

I, _____ (please print name) consent to the OGMPA collecting and using personal information about me in accordance with this form for:

Please check your approved uses below

- Administrative purposes.
- Inclusion in a published membership list.
- Inclusion in a membership list on the OGMPA web site.
- The purposes of research and development.

I, acknowledge that the Privacy Policy is available upon request and I have had an opportunity to review it, if I so choose.

I would like a link to my website's home page address to appear on the OGMPA web site.
http:// _____ (Please print)

I would like a link to my e-mail address _____ to appear on the OGMPA web site.

_____ Signature _____ Date

Forward your completed application and payment
Check <http://ontariogoatmilk.org> for our Current mailing Address
or email Office@ontariogoatmilk.org
or Use the On line form

OGMPA
c/o: Nairne Sittig
78821 Sdrd 5E RR#4 Kenliworth, ON N0G 2E0
Phone 1-5190848-3858

The OGMPA does not give out or otherwise disclose personal information unless permitted or required by law.

[Ontario Goat Milk Producers' Association www.ontariogoatmilk.org](http://www.ontariogoatmilk.org)