

HAABC Membership Application

Harbour / Business Name:
Contact Name:
Title:
Mailing Address:
Physical Address (if different from above):
Telephone:
Email:
Website:
Please select the membership type below, for which you are applying:
Voting Membership \$400 / Year (Harbours under the SCH Harbour Authority Program)
Non-Voting Membership \$450 / Year (any public harbour that is not under the SCH HA Program)
Associate Non-Voting Membership \$450 / Year (Private Marinas or Marine related businesses)

Please describe your reasons for wanting to be a Member of the HAABC.
How do your feel your organization would benefit the HAABC and its members?
How do you feel the HAABC can benefit your organization?