



APPLICATION TO BECOME A MEMBER OF THE
NANAIMO PORT AUTHORITY SPILL RESPONSE GROUP
2025

Company Name: _____

Contact Name: _____

Occupation/Title: _____

Company Address: _____

Postal Code: _____ E-mail Address: _____

Tel: _____ Emergency Tel: _____

I understand that by becoming a member of the Nanaimo Port Authority Spill Response Group I am in no way exonerated from any responsibilities I may have as laid down under current legislation.

Signature of Applicant _____ Date _____

Table with 2 columns: Fee Type, Amount. Rows include Sign Up Fee (\$120.00), Annual Membership Fee (366.00), GST 5% (#R119320794) (24.30), and Total (\$510.30).

Please e-mail this form to info@npa.ca

(For NPA Use)

Application Approved and Fees Received []

Signature _____

Date _____

Title _____