



Canadian Tour Guide Association of Toronto

69 Yonge Street, P.O. Box 17024 Yonge King, Toronto, M5E 1Y2

Web page: CTGAOFTORONTO.ORG

MEMBERSHIP APPLICATION Please fill in all the boxes. After completing the information below, please print this form. Sign it and mail to the above address or hand deliver it to a member of the executive. This form may be completed on computer or hand written. If handwritten please print.

Active Membership is available to tour guides who have worked in the Toronto area for two years or have completed ten tours. New tour guides who do not yet meet the above requirements are eligible for **Associate** Membership status. A cheque for membership dues must accompany this application. **Active Membership \$50.; Associate Membership \$40.** For more information please refer to the Membership information sheet posted on the webpage under the membership tab or contact the **Membership Co-ordinator at membership@ctgaoftoronto.org**

Active Membership

Associate Membership

First and Given Name:		
Address:		
City and Postal Code:		
E-Mail Address(es):		
Cell Phone:	Home Phone:	Fax:

PLEASE NOTE: As a CTGA member representing the association you are expected to be proficient, knowledgeable and capable of conducting a tour in English and your listed language(s). Failure to adhere to the language rules as set out in our By-Laws, may result in disciplinary action	
Language(s) spoken	
Language(s) written	
Language(s) read	

Tour companies for whom you have worked or currently work:		
How many city tours of Toronto did you conduct in the past two years?:		
Do you have the current Niagara Parks Tour Guide License? (not a membership requirement):		
A current First Aid Certificate? (not a membership requirement):	<input type="checkbox"/> yes	<input type="checkbox"/> no
A current CPR Certificate? (not a membership requirement):	<input type="checkbox"/> yes	<input type="checkbox"/> no

To be considered for membership It is required you provide the names and signature **two Active Members** of the CTGA of Toronto in good standing who are sponsoring your application.

Name (print or type):	Signature:	Date:
Name (print or type):	Signature:	Date:

I have reviewed the membership requirements and the Code of Ethics of the CTGA of Toronto. As a member, I will agree to the requirements set out. I also verify that the information provided above is accurate.

Name (print or type):	Signature:	Date:
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