



## **Application for Housing Providers**

PO Box 70003 RPO Kenaston, Winnipeg MB R3P 0X6 www. MNPHA.com Tel: 204-797-6746 Email: <a href="mailto:execdir@mnpha.com">execdir@mnpha.com</a>

If applicable, contact your Manitoba Housing Portfolio Officer about Financial Support Membership Year is April 1, 2018 – March 31, 2019

MEMBERSHIP INFORM Organization	MATION 			
Address				
Town/City			Postal Code:	
Website				
Contact Person			Position:	
Phone			Email:	
Board Chairperson		<del></del>	Phone:	
Email				
ANNUAL DUES		·		
Base Membership Fee	(select one):			
	20 units and less	\$200		
0	21-50 units	\$300		
O	51-100 units	\$350		
O	101 and more units	\$400		
(Co-op	CHF members 50% o	f base fee)		
			Total base fee:	\$
Number of housing up	nits under managem	ent as of Ap	ril 1, 2018	
Family	units			
Seniors units				
Special needs units				
Other ι	ınits			
	TOTAL # of UNITS		X \$0.50 per unit =	\$
Total Dues (base fee plus unit assessment) \$				
PAYMENT: Please ma	ke cheque payable to N	MNPHA and r	nail with this form to the above	address.
INFORMATION SHARII	NG:			
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The name of your orga	anization, address, and	website URL	will be published on the MNPH	IA website.
Personal information of key staff and board chairs is kept strictly confidential. Personal information will only be				
shared with other MN	PHA if expressed perm	ission has be	en given (see below)	·
I hereby provide MNF	PHA permission to shar	e my person	al contact information with oth	ner MNPHA members
Date:		Signature	::	