



# Alberta Outfitters Association

## Membership Application

Box 761 Cochrane, Alberta T4C 1A8  
Email: [aoa@albertaoutfitters.com](mailto:aoa@albertaoutfitters.com)  
[www.albertaoutfitters.com](http://www.albertaoutfitters.com)

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Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Outfitters/Guides License or CTR Permit#: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Amount: \_\_\_\_\_

Bond Company: \_\_\_\_\_ Amount: \_\_\_\_\_

# Horses Owned/Leased: \_\_\_\_\_ Reg. Brand: \_\_\_\_\_

Equipment List: \_\_\_\_\_  
\_\_\_\_\_

References: Client Name: \_\_\_\_\_ Address: \_\_\_\_\_

Business: \_\_\_\_\_ Address: \_\_\_\_\_

Character: \_\_\_\_\_ Address: \_\_\_\_\_

AOA Member: \_\_\_\_\_

Operation Description: (this description will be used in reply to inquiries)

\_\_\_\_\_

\_\_\_\_\_

If accepted for membership, I agree to abide by the constitution, standards and ethics as set forth by the Alberta Outfitters Association.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date