



**CANADIAN ROOFING CONTRACTORS' ASSOCIATION  
APPLICATION FOR ASSOCIATE MEMBERSHIP**



To: Executive Director  
Canadian Roofing Contractors' Association  
Suite 100, 2430 Don Reid Drive, Ottawa ON K1H 1E1  
Tel: (613) 232-6724 / (800) 461-2722 Fax: (613) 232-2893

Date: \_\_\_\_\_

The undersigned hereby applies for Associate membership in the Canadian Roofing Contractors' Association (CRCA).

**COMPANY NAME:** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**PROVINCE:** \_\_\_\_\_ **POSTAL CODE:** \_\_\_\_\_

**SIGNED:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**OUR REPRESENTATIVE WILL BE:** \_\_\_\_\_

**Telephone:** ( ) \_\_\_\_\_ **Fax:** ( ) \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Website:** \_\_\_\_\_

Acceptance in membership requires compliance with the Constitution, Bylaws and Rules of the Association.

\*\* A cheque drawn to the order of the Canadian Roofing Contractors' Association in payment of one year's dues must accompany this application. See attached Schedule of Dues to select your category of dues.

Applicant must be sponsored by 2 Active or Associate members in the nearest city to Applicant.

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

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

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

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

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

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

Date admitted to membership in CRCA \_\_\_\_\_  
M/D/Y

By: \_\_\_\_\_  
(For Board of Directors)

**CANADIAN ROOFING CONTRACTORS ASSOCIATION  
ASSOCIATION CANADIENNE DES ENTREPRENEURS EN COUVERTURE**

100-2430 Don Reid Drive · Ottawa, Ontario · K1H 1E1 · Tel: 800-461-2722 · 613-232-6724 · Fax: 613-232-2893  
Website: [www.roofingcanada.com](http://www.roofingcanada.com) · E-mail: [crca@roofingcanada.com](mailto:crca@roofingcanada.com)

## ***2018 CRCA MEMBERSHIP DUES STRUCTURE***

Membership dues are based on your annual dollar of roofing business as recorded in your most recently terminated business year and are payable as follows:

<b><u>CATEGORY</u></b>	<b><u>VOLUME OF BUSINESS</u></b>	<b><u>2018 DUES</u></b>
1	Under \$1,000,000	\$1288.00
2	\$1,000,000 - \$5,000,000	\$1724.00
3	\$5,000,000 - \$10,000,000	\$2638.00
4	Over \$10,000,000	\$3366.00

Your membership dues can be paid by **CHEQUE, VISA, MASTERCARD OR AMEX**. If you are paying by credit card, please provide us with your card number and expiry date below.

**\*\*\* PLEASE ADD APPLICABLE GST/HST TAXES \*\*\***

VISA       MASTERCARD       AMEX       CHEQUE ENCLOSED

CARD NUMBER#: \_\_\_\_\_

EXPIRY DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

If you should have any questions, please do not hesitate to contact the CRCA office.

**Tel: 613-232-6724 / Toll free: 800-461-2722**