CANADIAN ROOFING CONTRACTORS ASSOCIATION APPLICATION FOR INDUSTRY MEMBERSHIP

To: Executive Director **Canadian Roofing Contractors Association** Suite 100, 2430 Don Reid Drive OTTAWA ON K1H 1E1 Tel: (613) 232-6724 Fax: (613) 232-2893 The undersigned hereby applies for Industry Membership in the Canadian Roofing Contractors = Association. The undersigned acknowledges that acceptance of this application for membership is subject to approval by the Board of Directors of the Association. Industry Member: An Industry member shall be limited to a PERSON interested in literature from the Association regarding the industry and shall be entitled to all the privileges of membership in the Association save and except the holding of an elective office, provided further that such Industry member shall be subject to the provisions of the By-laws of the Association. An Industry Member shall not be entitled to vote at any meeting of the Association. APPLICANT'S NAME: Company Name: City: Province: Postal Code: Tel#: _____ Fax#: _____ Web site: _____ E-mail: _____ Acceptance of and privilege of membership requires compliance with the Constitution, Bylaws and Rules of the Association. It is clearly understood that the membership is for the individual person and not a company membership. Promotion of membership will be for the individual and not the company which employs the person. ** A cheque in the amount of \$300.00 plus applicable taxes drawn to the order of the Canadian Roofing Contractors Association in payments of one year's membership must accompany this application.

CRCA GST/HST Business Number: 106866510 RT

Date admitted to membership in CRCA ____

M/D/Y (For Board of Directors)



INDUSTRY MEMBERSHIP CRITERIA

It should be noted that Industry Membership excludes any person involved as a Roofing Contractors, Manufacturer or Distributor of roofing products. All members who have applied for Industry Membership are hereby asked to sign the agreement below.

I hereby agree to abide by the Industry Membership and confirm that I am not involved as a roofing contractor, manufacturer or distributor of roofing products. Listed below is the name of the company I work for along with the position I hold and a brief description of the company's business.

Date:
Individual's Name:
Company Name:
Position held:
Brief description of company business:
Signature:
Please return as soon as possible to the CRCA office by fax: 613-232-2893. If you should have any questions, please do not hesitate to contact the CRCA office.
If you do not qualify for Industry Membership, please put a (x) in the box
□ I do not qualify for Industry Membership.