



**APPLICATION FOR ACTIVE MEMBERSHIP  
(where no affiliate provincial association exist)**

To: Executive Director  
Canadian Roofing Contractors Association  
Suite 100, 2430 Don Reid Drive, Ottawa ON K1H 1E1  
Tel: 613-232-6724  
Email: [crca@roofingcanada.com](mailto:crca@roofingcanada.com)

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

The undersigned hereby applies for **Active membership (where no affiliate provincial association exist)** in the Canadian Roofing Contractors Association.

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

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

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

**SIGNATURE:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

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

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

**Email:** \_\_\_\_\_ **Website:** \_\_\_\_\_

Acceptance of membership requires compliance with the Code of Ethics, Bylaws and Rules of the Association.

\*\*Once your application is approved by the Board of Directors, you will receive an email with an invoice to the amount of **\$1720.00 plus applicable taxes** covering one year's membership fees.

If you have any questions, please contact the CRCA office.

