

2018-2019 Associate Membership Form

<u>Associate Membership:</u>			
Provincial Membership (Operates in only one of the Atlantic Provinces)	\$239.00		
Regional Membership (Operates in two or more Atlantic Provinces)	\$477.00		
National Membership (Associate is part of a National organization)	\$795.00		
Dues Amount as Selected:			
HST @ 15% (#106736432):			
Total to Pay:			
New Membership:		Renewal of Membership:	

Company Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

Phone: _____ Fax: _____

Primary Contact: _____ Job Title: _____

E-mail: _____ Direct or Cell Number: _____

Type of information you would like to receive: Fuel Notification Newsletter Events/Training/News

Type of Business: _____

Main Products/Services: _____

<u>Payment Information:</u>	
Visa: _____ MasterCard: _____ Amex: _____ Send Invoice (Renewing Member only): _____ Card Number: _____ Exp. Date: _____ Cardholder Name: _____	

**Please consider paying by cash or cheque instead of credit card. Thank you!*

If you would like additional contacts added to our distribution list & website, please use the Additional Contacts Form or send us a separate list with this form. Thank you!