



NBCSA

Associate Membership Application Form

Company Name: _____

Address: _____

City: _____ Province: _____

Postal Code: _____ Country: _____

Phone Number: _____ Fax Number: _____

Contact Name: _____ E-Mail: _____

Associate membership is renewable on an annual basis in accordance with the following fee schedule. Please circle the appropriate amount (all membership fees are subject to 15% HST)

Number of Employees	NB Based Non Construction	NS, PEI, NFLD Construction	NS, PEI, NFLD Non-Construction
1	\$100.00/year	\$500.00/year	\$750.00/year
2	\$200.00/year	\$500.00/year	\$750.00/year
3	\$300.00/year	\$500.00/year	\$750.00/year
4	\$400.00/year	\$500.00/year	\$750.00/year
5-10	\$500.00/year	\$500.00/year	\$750.00/year
11-50	\$1,000.00/year	\$750.00/year	\$1,500.00/year
51+	\$2,000.00/year	\$1,000.00/year	\$3,000.00/year

<p>*Payment or purchase order number MUST be included with completed application</p> <p>Fee per year: \$ _____</p> <p>15% HST: x _____</p> <p>Total payable To NBCSA: \$ _____</p>	<p>Payment Method:</p> <p>Visa Number: _____</p> <p>Expiry: _____</p> <p>P.O.#: _____ Cheque: _____</p>
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NBCSA Office use: Expiry Date: _____ Invoice #: _____

Mail or fax to :

NBCSA, PO Box 731, Miramichi NB, E1V 3V4
Tel: (506)-627-1477 Fax: (506) -624-9581