



CORPORATE MEMBERSHIP APPLICATION

1. Corporate Information

Company Name _____

Doing Business As _____

Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____

Website _____

Language of correspondence English French

The Canadian chamber network is a three tier network with chambers working on the behalf of businesses in local communities, provinces and territories and at the national level through the Canadian Chamber of Commerce. If you belong to other tiers of the network, we would be interested in knowing. Please indicate:

The company is a member of the:

_____ prov./territorial chamber of commerce

_____ local chamber of commerce

2. Primary Contact

Mr. Mrs. Ms. Dr.

Name _____ Title _____

Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____

Email _____

Language of correspondence English French

3. Invoice Recipient

Mr. Mrs. Ms. Dr.

Name _____ Title _____

Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____

Email _____

Language of correspondence English French

4. Areas of Interest

Please rank your top three and mark other areas of interest with a check mark.

- | | | |
|--|---|---|
| <input type="checkbox"/> Aboriginal Affairs and Canada's North | <input type="checkbox"/> Intellectual Property | <input type="checkbox"/> Science and Technology |
| <input type="checkbox"/> Canada-U.S. | <input type="checkbox"/> Internal Trade | <input type="checkbox"/> Skills and Immigration |
| <input type="checkbox"/> Competition Policy | <input type="checkbox"/> International Affairs | <input type="checkbox"/> Small- and Medium-sized Business |
| <input type="checkbox"/> Environment | <input type="checkbox"/> Labour Relations | <input type="checkbox"/> Tourism |
| <input type="checkbox"/> Fiscal Policy | <input type="checkbox"/> Natural Resources and Energy | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Infrastructure | <input type="checkbox"/> Responsible Business Conduct | |
| <input type="checkbox"/> Innovation | <input type="checkbox"/> Retirement Savings | |

Other areas of policy interest: _____

Top countries/regions your company does business in:

1. _____ 2. _____ 3. _____

5. Officers of the Company

List the two highest-ranking company officials to be contacted.

Name _____ Title _____

Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____

Email _____

Preference of correspondence English French

Name _____ Title _____

Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____

Email _____

Preference of correspondence English French

6. Membership Investment

Annual Investment _____ + applicable taxes (HST Registration # 106844285)= _____ Total

Invoice me Cheque attached Visa MasterCard Amex

Credit Card No. _____ Expiry Date _____

Name _____ Telephone _____

Cardholder's Signature _____

Account Manager, Corporate Relations _____

7. Type of Industry

- | | | |
|--|--|---|
| <input type="checkbox"/> Accommodation | <input type="checkbox"/> High Technology | <input type="checkbox"/> Printing & Production |
| <input type="checkbox"/> Advertising, Marketing & Communications | <input type="checkbox"/> HR & Payroll Services | <input type="checkbox"/> Real Estate & Development |
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Importing & Exporting | <input type="checkbox"/> Retail Trade |
| <input type="checkbox"/> Arts, Entertainment & Recreation | <input type="checkbox"/> Legal Services | <input type="checkbox"/> Skilled Trades |
| <input type="checkbox"/> Construction & Engineering | <input type="checkbox"/> Logging & Forestry | <input type="checkbox"/> Transportation & Warehousing |
| <input type="checkbox"/> Finance & Insurance | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Utilities |
| <input type="checkbox"/> Food & Beverage Services | <input type="checkbox"/> Media | <input type="checkbox"/> Wholesale Trade |
| <input type="checkbox"/> Health Care & Social Services | <input type="checkbox"/> Mining, Oil & Gas | <input type="checkbox"/> Other Business Services |

8. List of Committees*

Our corporate members are encouraged to participate on our committees and task forces. It is through your input that we are able to effect change on your behalf. (Please indicate name of company representative for each committee of interest.)

Business Law

Name: _____

Title: _____

Email: _____

Innovation

Name: _____

Title: _____

Email: _____

Competition Law and Policy

Name: _____

Title: _____

Email: _____

Intellectual Property

Name: _____

Title: _____

Email: _____

Economic Policy

Name: _____

Title: _____

Email: _____

International Affairs

Name: _____

Title: _____

Email: _____

Human Resources Policy

Name: _____

Title: _____

Email: _____

Natural Resources and Environment

Name: _____

Title: _____

Email: _____

Immigration Policy

Name: _____

Title: _____

Email: _____

SME

Name: _____

Title: _____

Email: _____

Indigenous Affairs

Name: _____

Title: _____

Email: _____

Taxation

Name: _____

Title: _____

Email: _____

Territorial Policy
Name: _____
Title: _____
Email: _____

Transportation & Infrastructure
Name: _____
Title: _____
Email: _____

Ottawa Liaison Please provide me with more information
(VP or equivalent level)
Additional fee applies.
Name: _____
Title: _____
Email: _____

*Subject to eligibility

9. I would like more information on:

- Advertising opportunities
- BIAC Canada
- Board of Directors
- Canadian Chamber of Commerce background information
- Canadian Intellectual Property Council
- Canadian Services Coalition
- Carnet and Document Certification
- Events
- International Arbitration
- Membership in a local chamber of commerce
- Membership in a prov./territorial chamber of commerce
- Policy committees
- Sponsorship opportunities
- Thought Leadership Series Roundtables

Any personal information provided on the attached form will be used by the Canadian Chamber of Commerce, as set out in our Privacy Policy, to conduct the transaction indicated on this form. Please consult our Privacy Policy, available online at Chamber.ca or contact our Privacy Officer at privacy@chamber.ca or 613.238.4000 (229).

Thank you for filling out this form. Please send it to the location nearest you.



Chamber.ca | info@chamber.ca | [f CanadianChamberofCommerce](https://www.facebook.com/CanadianChamberofCommerce) | [t @CdnChamberofCom](https://twitter.com/CdnChamberofCom)

Ottawa
1700 - 275 Slater Street
Ottawa ON K1P 5H9
T: 613.238.4000
F: 613.238.7643

Toronto
901 - 55 University Avenue
Toronto, ON M5J 2H7
T: 416.868.6415
F: 416.868.0189

Montreal
560 - 999 Boulevard de
Maisonnette Ouest
Montreal, QC H3A 3L4
T: 514.866.4334
F: 514.866.7296

Calgary
PO Box 38057
Calgary, AB T3K 5G9
T: 403.271.0595
F: 403.226.6930

FEE SCHEDULE

Table 1: Net Worth (Shareholder's Equity)

Minimum	Maximum	Annual Fee – Step 1
Up To	\$8,000,000	\$600
\$8,000,000	\$25,000,000	\$1,300
\$25,000,000	\$50,000,000	\$1,800
\$50,000,000	\$100,000,000	\$3,300
\$100,000,000	\$150,000,000	\$4,000
\$150,000,000	and above	\$ 4,000 plus \$5 per additional \$Million

Table 2: Total Annual Revenue

Minimum	Maximum	Annual Fee – Step 2
Up To	\$8,000,000	\$400
\$8,000,000	\$25,000,000	\$600
\$25,000,000	\$50,000,000	\$1,000
\$50,000,000	\$100,000,000	\$1,500
\$100,000,000	\$200,000,000	\$2,500
\$200,000,000	\$400,000,000	\$4,000
\$400,000,000	and above	\$4,000 plus \$2 per additional \$Million

Annual Membership Fee

Total Calculation from Net Worth (Table 1) _____

plus Total Calculation from Annual Revenue (Table 2) _____

equals SUBTOTAL _____

*plus applicable taxes _____

equals TOTAL FEE _____

HST Reg. #106844285 | QST Reg. # 1006090296

*The applicable tax rate will be based on the member's province/territory of residence.
 AB, BC, MB, NT, NU, SK, YT: 5% GST | QC: 5% GST + 9.975% QST | ON: 13% HST | NB, NL, NS, PE: 15%
 HST Outside of Canada: 15% HST