



Corporate Membership Application

1. Corporate Information

Company Name _____

Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____

Website _____

Language of correspondence English French

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"/> Canada - U.S. Border Issues | <input type="checkbox"/> Government Spending | <input type="checkbox"/> Pension Reform |
| <input type="checkbox"/> Canada - U.S. Relations | <input type="checkbox"/> Labour and skills | <input type="checkbox"/> Privacy |
| <input type="checkbox"/> Competition Policy | <input type="checkbox"/> Immigration Policy | <input type="checkbox"/> Science and Technology |
| <input type="checkbox"/> Corporate Social Responsibility | <input type="checkbox"/> Innovation | <input type="checkbox"/> Taxation Policy |
| <input type="checkbox"/> Counterfeiting and Piracy | <input type="checkbox"/> Intellectual Property Protection | <input type="checkbox"/> Telecommunications Policy |
| <input type="checkbox"/> Debt Policy | <input type="checkbox"/> International Trade / Investment | <input type="checkbox"/> Transportation Policy |
| <input type="checkbox"/> Economic Policy | <input type="checkbox"/> Interprovincial Trade / Investment | |
| <input type="checkbox"/> Environment and Energy | <input type="checkbox"/> Payroll Taxes / EI | |

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

Please add any additional contact names and coordinates on a separate page of paper.

6. Membership Investment

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

Invoice me Cheque attached Visa MasterCard Amex

Credit Card No. _____ Expiry Date _____

Name / Title _____ Telephone _____

Cardholder's Signature _____

Servicing Director, Corporate Relations _____

7. Type of Business

- | | | |
|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Health / Social Services | <input type="checkbox"/> Oil and Gas |
| <input type="checkbox"/> Business Services (inc. Law) | <input type="checkbox"/> High Technology | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Communication | <input type="checkbox"/> Industry Association | <input type="checkbox"/> Resource Based |
| <input type="checkbox"/> Computer / Software | <input type="checkbox"/> Logging / Forestry | <input type="checkbox"/> Retail Trade |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation / Storage |
| <input type="checkbox"/> Finance / Insurance | <input type="checkbox"/> Professional, Scientific
and Technical Services | <input type="checkbox"/> Wholesale Trade |
| <input type="checkbox"/> Food / Beverage | | |
| <input type="checkbox"/> Other type of business _____ | | |

8. List of committees*

Our corporate members are encouraged to participate in 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)

Arbitration _____	Intellectual Property _____
Competition Law and Policy _____	International Affairs _____
Economic and Taxation _____	Ottawa Liaison Committee _____ (VP or equivalent level)
Energy/Environment _____	
Innovation _____	Transportation _____

*Subject to eligibility

9. I would like more information on:

- | | |
|--|--|
| <input type="checkbox"/> Canadian Chamber of Commerce background information | <input type="checkbox"/> Policy Committees |
| <input type="checkbox"/> Canadian Chamber event sponsorship opportunities | <input type="checkbox"/> Products and Services |
| <input type="checkbox"/> Carnet and Document Certification | <input type="checkbox"/> Advertising Opportunities |
| <input type="checkbox"/> National Business Leaders Round Tables | <input type="checkbox"/> Specialized Publications |

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 on-line at Chamber.ca or contact our Privacy Officer at privacy@chamber.ca or 613.238.4000 x 229.

Chamber.ca

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

OTTAWA
420 - 360 Albert Street
Ottawa, ON K1R 7X7
613.238.4000
613.238.7643
info@chamber.ca

TORONTO
901 - 55 University Avenue
Toronto, ON M5J 2H7
416.868.6415
416.868.0189
info@chamber.ca

MONTREAL
709 - 1155 University Street
Montreal, QC H3B 3A7
514.866.4334
514.866.7296
info@chamber.ca

CALGARY
PO Box 38057
Calgary, AB T3K 5G9
403.271.0595
403.226.6930
info@chamber.ca

Fee schedule

Table 1: Net Worth (Shareholder’s Equity)

Minimum	Maximum	Annual Fee – Step 1
Up To:	\$ 8,000,000	\$ 500.00
\$ 8,000,000	\$ 25,000,000	\$ 1,300.00
\$ 25,000,000	\$ 50,000,000	\$ 1,800.00
\$ 50,000,000	\$ 100,000,000	\$ 3,300.00
\$ 100,000,000	\$ 150,000,000	\$ 4,000.00
\$ 150,000,000	and above	\$ 4,000.00 plus \$5.00 per additional \$Million

Table 2: Total Annual Revenue

Minimum	Maximum	Annual Fee – Step 2
Up To:	\$ 8,000,000	\$ 300.00
\$ 8,000,000	\$ 25,000,000	\$ 600.00
\$ 25,000,000	\$ 50,000,000	\$ 1,000.00
\$ 50,000,000	\$ 100,000,000	\$ 1,500.00
\$ 100,000,000	\$ 200,000,000	\$ 2,500.00
\$ 200,000,000	\$ 400,000,000	\$ 4,000.00
\$ 400,000,000	and above	\$ 4,000.00 plus \$2.00 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** _____

*The applicable tax rate will be based on the member’s province/territory of residence. AB, MB, NT, NU, PE, SK, YT: 5% GST | QC: 5% GST + 8.5% QST | BC: 12% HST | NB, NL, ON: 13% HST | NS: 15% HST
 Outside of Canada: 15% HST