



# Business Membership Application

Please mail your application and payment to CHOA at the above address

Legal Name: \_\_\_\_\_

Other Business Names/Branches: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Contact: \_\_\_\_\_

Member in good standing of a Professional Association ( ) Name: \_\_\_\_\_

Member in good standing of the Better Business Bureau ( ) Member since: \_\_\_\_\_

Business Classification: Sole Owner ( ) Partnership ( ) Incorporated ( ) Association ( ) Other \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

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

### Officer, Principals or Partners

Name	Position	Telephone

### Business References

Company Name	Contact Name	Telephone

### To be completed by applicant – Annual Business Membership fee is \$225

I \_\_\_\_\_ (signatory), at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_\_\_, authorize the Board of CHOA or appointed representative(s) to obtain or verify such information disclosed as may be necessary in connection with the establishment of a business membership with CHOA BC. The Board of Directors of CHOA retains the right to refuse application for business membership or terminate a business membership and cancel all privileges, where on reasonable complaints or unsatisfactory resolution of disputes, the continuing business membership would not serve the interests of the CHOA membership. By applying for membership I declare that there are no outstanding claims or charges against my corporation at this time that may conflict with this membership being in good standing.

Signature \_\_\_\_\_ Title \_\_\_\_\_

Method of Payment: Cheque ( ) enclosed payable to CHOA     VISA ( )     Master Card ( )

Credit Card # \_\_\_\_\_ Exp Date: \_\_\_\_\_

Card Holder: \_\_\_\_\_ Signature: \_\_\_\_\_

FOR OFFICE USE ONLY    Approved: \_\_\_\_\_ Starting Date: \_\_\_\_\_