



APPLICATION FOR MEMBERSHIP (ASSOCIATE & CONSULTANT)

I (we) hereby make Application for Membership in the ALBERTA SAND AND GRAVEL ASSOCIATION.

Name of Company _____

Address _____ Postal Code _____

Telephone _____ Fax _____

Email Address _____

Person to whom correspondence should be addressed _____

We operate in Alberta as one of the following:

- Manufacturer
- Consultant
- Testing
- Supplier - Equipment

YEARLY MEMBERSHIP FEE: \$325.00 + GST

I (we) herewith tender the Membership Fee of the Association and agree to pay fees as required to maintain Membership.

Payment: (please circle one)

 Visa MasterCard Cheque

Credit Card No.: _____ Name on Card: _____

Expiry Date: _____ Signature: _____

Cheques should be made payable to the ALBERTA SAND AND GRAVEL ASSOCIATION and mailed to:

#308 - 10080 Jasper Ave NW, Edmonton AB T5J 1V9

DATED THIS _____ DAY OF _____, A.D. 20 _____.

COMPANY

SIGNATURE

Application approved by the Executive Director of this Association this _____ day of _____, 20 _____.

EXECUTIVE DIRECTOR