2012 ASSOCIATE MEMBERSHIP APPLICATION

www.psac.ca

Company Name _____

Head Office Address _____

City _____ Prov _____ PC _____

Phone _____ Web _____

Fax _____ Email _____

President/Senior Officer _____

Designated Representative/Title *(if different from above)* _____

Mailing Address of Designated Representative _____
(if different from head office)

_____

Please identify your primary business field _____

What percentage of your business is derived from the petroleum industry? _____%

Corporate Description (50 to 75 words for Membership Directory)

_____

_____

Are you interested in:

- ❑ Attending PSAC events?
- ❑ Receiving PSAC publications?
- ❑ Sponsoring PSAC events?
- ❑ Advertising in PSAC publications/on Web site?

(Associate Members receive member rates on all publications and events)

ANNUAL DUES: The established dues rate is per company or individual.

ASSOCIATE MEMBER FEE (Cdn$)	$ 750.00
Plus 5% GST #R107840605	$ 37.50
Payment enclosed	**$ 787.50**

Payment by: ❑ Cheque** (mailed to PSAC) ❑ Visa ❑ MasterCard ❑ AmEx

Card # _____ Exp. _____

Name on card _____ Signature _____

***Payment must accompany application*

_____ _____ _____

Date Authorizing Signature Title

*****Payment must accompany application***

FAX completed application to: (403) 263-7174 or MAIL to : #1150, 800 – 6th Avenue SW, Calgary, AB T2P 3G3
Questions? Email info@psac.ca or call (403) 264-4195