



# Professional Member Application Form

Company			
Contact			
Address			
City			
Postal Code			
Telephone			
Email			
Website			
How long has your company been in operation?			
Please indicate your type of business:			
<input type="checkbox"/>	Distributor	<input type="checkbox"/>	Municipality
<input type="checkbox"/>	Manufacturer	<input type="checkbox"/>	Wholesaler
<input type="checkbox"/>	Manufacturer's Agent		
<input type="checkbox"/>	Other:		

Please continue to the next page.

Unit #2 – 2412 Faithfull Avenue, Saskatoon, SK S7K 4A6  
 T. 306-664-2154 E. [admin@mca-sask.com](mailto:admin@mca-sask.com) [www.mca-sask.com](http://www.mca-sask.com)



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## Membership Dues Remittance (G.S.T. #R107686339)

Membership fees are \$600 + GST annually.

Method of Payment	<input type="checkbox"/>	Cheque	<input type="checkbox"/>	Invoice
	<input type="checkbox"/>	VISA	<input type="checkbox"/>	MasterCard
Card Number				
Expiry Date	CVV			
Card Holder Name				
Signature				

The undersigned hereby makes application for membership in the Mechanical Contractors Association of Saskatchewan Inc., an Employers' organization. The applicant agrees that, upon approval of this application by the Board of Directors, will pay membership dues in accordance to the fee structure above and will at all times comply with the rules, regulations, constitution and bylaws of the Association as the same are from time to time in force and will actively engage in promoting the objectives and interests of the Association.

Signature	
Print Name	
Title	
Date	

Please send completed form by email or mail to the address below.

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**INDUSTRY FOCUSED. MEMBER DRIVEN.**