

2017 CSC Membership Application

"Committed to the ongoing development & delivery of quality education programs, publications & services for the betterment of the construction community."

Salutation:	First Name: Last Name:			
Non–CSC Designations:		Title:		
Company Name:				
Mailing Address:				
			Postal Code:	
Telephone:	Fax:	E-:	Mail:	
Web Site:		Mail Preference: □ Mail □ E-Mail		
	<u>v one)</u> □Atlantic □Calgary □Edmo egina □Saskatoon □Toronto □V			
IMPORTANT NOTI ELECTRONIC DOC	acy Policy please visit www.csc-coeff CE - In accordance with the Please With the Plea	ERSONAL INFORMA C requires that you cho		
☐ I have reviewed the CSO	C Privacy Policy, and I DO NOT ACCI	EPT its conditions. If you cho	pose this option, please be aware that you will not	
			y Kenilworth Publishing Inc. on behalf of CSC.	
(Check One Only) □ Specification Writer □ Engineer □ Product Representative □ General Contractor	 □ Specification Consultant □ Engineer Technologist □ Project Manager □ Trade Contractor 	 □ Architect □ Contract Administrator □ Landscape Design □ Facility Management 	□ Architect Technologist □ Manufacturer Representative □ Interior Design □ Student □ Supplier □ Other	
☐ FULL YEAR Application (up to 15 months of membe	is made Jan. – Mar. = \$ 250.00 n is made Oct. – Dec. = \$ 250.00* rship for the price of 12) p - 50% of Membership Fee (see below	□ PART YEAR Application □ STUDENT Membership	n is made April – June = less 25% \$ 187.50* n is made July – September = less 50% \$ 125.00* \$ 50.00 (see below for details and restrictions)**	
Membership Fee: \$	HST / GST 106970973: \$	QST:1212848561	TQ0001: \$ Total:\$	
* Discounts are for NEW me: ** STUDENT - Student mem of training. The student I *** ASSOCIATE MEMBER	mbers only. A new member is an individual to the is an individual undergoing fulltime must provide proof of fulltime enrolment.	al who has not been a member of training in a school of archite erience in any of the fields that	rm. Memberships are non-transferrable. of CSC within the past 5 years. cture, engineering or technology for the period would qualify him / her for membership into CSC, who	
PAYMENT METHOD:	□ CHEQUE (enclosed) □ MAS	TERCARD □ VISA	□ AMERICAN EXPRESS	
Card Number:		Expir	y: Security Code:	
Card Holders Name (PLEAS	SE PRINT):	Card Holder Sign	nature:	
X		Date:		
IMPORTANT ► App	licants Signature		(Sponsored by CSC Member, if any)	