

## 2018 APPLICATION FOR SIX-MONTH TRIAL MEMBERSHIP

Membership dues are non-refundable Dues and fees subject to change without notice

## **Company Information**

Company's Full Legal Name:		
Trade Name (if different from above):		
Primary Contact:	Email:	
Business Address:		
Senior Company Official:	Business Tel:	
Website:	Business Fax:	
How did you hear about the HHCA?	What year was your company established?	
	Has your company been a member of the HHCA in the past? If yes, when?	
Accounting Information		
Accounting Contact:	Email:	
Additional Contacts		
Name & Position: Email:		
Name & Position:	& Position: Email:	
Reference/Sponsor		
Firm, contact & phone:		
Firm, contact & phone:		
Membership Category Ann	nual Membership Fee with Plan Room Upgrade (6 months)	<del>\$710.00</del>
Trial	Membership includes alphabetical listing in HHCA's online directory,	\$600
Trada Contractor	complimentary affidavit services, reduced rates on CCA & CCDC documents, free signing of statutory declarations, free career advertisement, complimentary HR resources and more. Plan Room upgrade includes access to BestBidz (electronic plans room), bidders lists, weekly Plans on Display and more.	
TRIA tailo	AL MEMBERS are entitled to select from a number of additional benefits red to their individual priorities. Upon confirmation of your membership, I contact you to design a customized benefit package for your company.	
Business description (include division codes):	SUBTOTAL	\$600
. , , , , ,	HST (#R107462830)	\$78
Payment Information	TOTAL PAYMENT	\$678
Payment in full by:   Cheque   Amex*   VISA*   MC* *a 2% service charge applies to all credit card transactions		
Card NO.	Expiry	
Cardholder Name:	Signature	
I, the undersigned, hereby make application for membership in the Hamilton-Halton Construction Association with all the rights and privileges hereto. Completion of this application indicates consent to abide by the HHCA's Member Code of Ethics, by-laws and regulations and to receive electronic communications.		
Authorized Signature of Applicant	Date	