



P. O. Box 475
Corner Brook, NL A2H 6E6
Tel: (709) 634-5831
Fax: (709) 639-9710
Email: sherry@gcbbt.com
Website: www.gcbbt.com

MEMBERSHIP APPLICATION

- Business** **Reg. Charity/Non-Profit/Individual** **Business Student/Retiree**
 Government **Oil & Gas**

Name _____

Mailing Address _____

Phone _____ Fax _____ Postal Code _____

Preferred method of receiving Board of Trade Correspondence: E-mail Fax

E-Mail _____ Web-Site _____

Type of Business/Organization: (i.e. accountants, contractors) _____

Membership Rate _____

Number of full-time employee's _____

First Delegate

Second Delegate

Title

Title

On behalf of the Organization/Business/Individual listed above, I / we hereby accept Membership into the Greater Corner Brook Board of Trade. I / we hereby agree to pay the annual membership fee and accounts for all other services provided.

Signature _____ Date _____

Preferred Method of Payment

- Cash Cheque Visa MasterCard Invoice

Please make Cheque payable to Greater Corner Brook Board of Trade

Card Holder (as name appears on card) _____

Credit Card # _____ Expiry Date ____/____

**Please return this form by fax to (709) 639-9710
or Mail to P.O. Box 475 Corner Brook, NL A2H 6E6**



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Code of Conduct and Commitment:

As a member of the Greater Corner Brook Board of Trade, I/we recognize that membership is a privilege. Further, membership brings with it the responsibility to assure that all members also understand and commit to the following membership undertaking. Accordingly, I/we shall commit to:

1. Conduct all business and professional activities in a reputable manner, to reflect honorably upon the business community.
2. Respect the good reputation, profile, and status of the Chamber will represent accordingly.
3. Understand, support, and promote the Missions and Goals of the Chamber (View details on website).
4. Whenever reasonably possible, participate in events and activities of the Chamber.
5. Promote and enhance business growth and activities in the City of Corner Brook.

I/we understand that failure to adhere to the professional and personal obligation outlined above and defined in Chamber By-laws and Board of Trade Act can result in the termination of my membership by the Chamber's Board of Directors. (Board)

On execution of the undertaking, please consider this to be my/our application for membership to the Board of Trade.

If the Board accepts this application, I/we agree to pay in advance the fees for membership, which is non-refundable as may be prescribed by the Board from time to time. (Current rates of my/our membership are outlined herein)

Membership continues for 12 consecutive months, as of date of acceptance and continues until revoked in writing with 30 days notice.

All corporate members are fully responsible and accountable for all actions and charges incurred by their designated Representatives.

I/we also understand and agree with the Board of Trade's Personal Information Policy below.

I/we have the authority to bind the membership.

Signature _____

Date _____

Personal Information Policy:

The undersigned acknowledges that the Greater Corner Brook Board of Trade may be provided with personal information, which it may share with certain services providers. However, such personal information will be used for internal purposes only, unless prior consent of its disclosure has been obtained. The Board of Trade does not view information pertaining to the name, title, business address, telephone number, email, and/or website addresses of its business members to be personal information.

The Greater Corner Brook Board of Trade and its service providers will not disclose personal information to third parties other than in compliance with applicable federal and provincial privacy laws.

Signature _____

Date _____