

Business Association of Newfoundland & Labrador

Unit 50, Hamlyn Road Plaza, Suite 220, St. John's, NL A1E 5X7
Telephone: (709) 437-1002 Facsimile: (709) 437-1002
e-mail: admin@banl.nf.ca

Application for Membership

So that your application can receive proper consideration, it is essential that all information requested be complete and in detail. Please **print** or **type** the information. Completed applications should be returned to the Association office. You will be notified in approximately 3 to 4 weeks of your application status.

Please note that the fee structure, which primarily covers the cost of regular weekly luncheon meals will be as follows:

\$315.00 Semi-Annually + HST

(APPLICATION WILL NOT BE PROCESSED WITHOUT FEE FOR FIRST SIX MONTHS BEING ATTACHED)

CATEGORY : _____

COMPANY NAME (LEGAL): _____

COMPANY TRADE NAME: _____
(If Different)

BUSINESS ADDRESS: _____

MAILING ADDRESS: _____

BUSINESS PHONE #: _____ **FAX #:** _____

DATE BUSINESS STARTED: _____
 DD **MM** **YY**

DELEGATE'S NAME: _____

 Title Home Phone # (Optional)

ALTERNATE DELEGATE: _____

 Title Home Phone # (Optional)

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CATEGORY OF MEMBERSHIP must be non competitive to an existing classification and that which generates more than fifty percent of the total revenue of the company. This is the only product/service you will be permitted to promote at Association meetings.

Please give a brief description of the company's business with reference to the above.

APPLICANT'S SIGNATURE: _____ DATE: _____

SPONSORING MEMBER/COMPANY: _____

THIS SECTION FOR ASSOCIATION USE ONLY

Date Received _____ Date Accepted _____

1st Reading _____ Date Notified _____

2nd Reading _____

3rd Reading _____ Copy to: Treasurer - Secretary

Category _____

Notes: _____

Chairperson: Membership Committee