



**APPLICATION FOR ACTIVE MEMBERSHIP**

To: Executive Director  
Canadian Roofing Contractors Association  
Suite 100, 2430 Don Reid Drive, Ottawa ON K1H 1E1  
Tel: 613-232-6724 / Fax: 613-232-2893

Date: \_\_\_\_\_

The undersigned hereby applies for Active membership in the Canadian Roofing Contractors Association. Active membership shall be limited to a company primarily and actively engaged in the ICI roofing and related sheet metal contracting business in Canada.

**COMPANY NAME:** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**CITY/PROVINCE:** \_\_\_\_\_ **POSTAL CODE:** \_\_\_\_\_

**SIGNED:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**OUR REPRESENTATIVE WILL BE:** \_\_\_\_\_

**Telephone:** ( ) \_\_\_\_\_ **Fax:** ( ) \_\_\_\_\_

**Website:** \_\_\_\_\_

**Email:** \_\_\_\_\_

Acceptance in membership requires compliance with the Constitution, Bylaws and Rules of the Association.

Acceptance as an Active member requires that the applicant first be accepted as a member of the applicable provincial association affiliated with the Canadian Roofing Contractors Association.

\_\_\_\_\_  
(Applicable Provincial Association)

\_\_\_\_\_  
Date of acceptance by P.A.

Certified by: \_\_\_\_\_  
Signature

Date admitted to membership in CRCA \_\_\_\_\_  
M/D/Y

By: \_\_\_\_\_  
(For CRCA BOD)