

# MEMBERSHIP APPLICATION

We hereby apply for membership in the Employers' Health and Safety Association of British Columbia (dba the Employers' Forum).

## COMPANY INFORMATION

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

## REPRESENTATIVE INFORMATION

Representative Name: \_\_\_\_\_

Title: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Alternate's Name: \_\_\_\_\_

Title: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

*Please note: annual dues for association membership are currently set at \$800 per year*