



CanadaGAP Affiliate Application Form

Company Name		
Contact Person	Optional <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss	
Title		
Address		
City	Province	Postal Code/ZIP
Phone	Fax	Email
Please indicate your sector (choose below or specify):		
<input type="checkbox"/> Service Provider <input type="checkbox"/> Retailer <input type="checkbox"/> Processor <input type="checkbox"/> Association <input type="checkbox"/> Government <input type="checkbox"/> Supplier		
Preferred Method of Correspondence: <input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Mail		
Payment of Affiliate Fee (annually): \$1,500 CDN (\$1,000 CDN for licensed content providers)		
<input type="checkbox"/> Cheque enclosed (payable to CanAgPlus - no GST/HST) <input type="checkbox"/> Please invoice me <input type="checkbox"/> Credit card payment - call 613-829-4711		
Return completed form to: CanadaGAP® Program 245 Menten Place, Suite 312 Ottawa, Ontario K2H 9E8 CANADA Questions? Contact us: Phone: 613-829-4711 Email: info@canadagap.ca Fax: 613-829-9379 Web: www.canadagap.ca		
THANK YOU FOR YOUR SUPPORT! <i>CanadaGAP® is an operating name of CanAgPlus, a Canadian not-for-profit corporation.</i>		
OFFICE USE ONLY		
Payment Received	Date Received	Approved