



# Canadian Marketing Association Ottawa Chapter MEMBERSHIP APPLICATION



**YES! I want to join the Ottawa Chapter CMA! Please activate my membership based on the level and payment method I have chosen below.**

### Member

Name .....  
Company .....  
Title .....  
Address .....  
City .....  
Postal Code .....  
Office Phone .....  
Fax .....  
E-Mail .....

*Your membership dues cover yourself as a member and one other individual from the same organization as an associate. Please complete information under Associate.*

### Additional Associate -- \$25 each

Name .....  
Company .....  
Title .....  
Address .....  
City .....  
Postal Code .....  
Office Phone .....  
Fax .....  
E-Mail .....

Additional associates from the same organization may be added for \$25, please provide information on a separate sheet.

### Associate

Name .....  
Company .....  
Title .....  
Address .....  
City .....  
Postal Code .....  
Office Phone .....  
Fax .....  
E-Mail .....

*We will NOT share member email or fax numbers with CMA National or anyone else unless you grant us permission.*

*\_\_\_\_ Yes, go ahead and share with CMA National*



**Fax:** 613-248-4667



**Mail:** Ottawa Chapter CMA  
P.O. Box 8024  
Alta Vista Postal Terminal  
Ottawa, ON K1G 3H6

### Membership levels

- \$ 50** – Student
- \$ 99** – Non-Profit Organization
- \$ 99** -- Self Employed
- \$150** -- Private Corp / Government

### Total Membership Enclosed

Primary Membership Dues \$ ..... Additional Membership Dues \$ .....

Total \$ ..... Note: G.S.T. Not Applicable

Cheque (Made Payable to Ottawa Chapter CMA)     Purchase Order No # .....

Visa             Mastercard

Card # ..... / Expiry Date .....

Amount ..... / Today's date .....

Card Holder Name ..... / Signature .....

**The CMA Ottawa Chapter membership year runs from September 1<sup>st</sup> to August 31<sup>st</sup>.**