

APPLICATION FOR SUPPLIER MEMBERSHIP

Date of Application:_____

Qualification for Supplier Membership

Supplier membership in the LBMAO is open to any manufacturer, distributor, cooperative purchasing organization (buying group), wholesaler or service firm which sells product or provides services to the retail lumber, building material, hardware trade, home improvement or home décor.

Upon receipt of this application the applicant will receive LBMAO mailings and periodicals as distributed from the LBMAO office. Membership must be approved by the Board of Directors at the next board meeting to be held after receipt of the application.

Annual Supplier Membership Fees:

Annual Supplier Membership Fee:\$495.00 + APPLICABLE TAXAdditional Fee per Branch (if Applicable):\$185.00 + APPLICABLE TAXMembership Fee includes:\$185.00 + APPLICABLE TAX

- 1 subscription to the LBMAO Directory App for each paid location
 Free product listings in LBMAO Directory App
- Preferred rates on LBMAO services and events

- LBMAO Reporter Magazine
- All LBMAO mailings
- Up to 5 contacts for mailings (Including Primary Contact)

Supplier Information:

Company Name:						
Street Address:	Mai	ling Address:	PO Box:			
City/Town:	Prov	/.:	Postal Code:			
Phone No.:	Fax No.:		Toll Free No.:			
Primary Contact Name:		Title:				
E-Mail:		Website:	_Website:			
Additional Contacts:						
1. Name:	Title:		E-Mail:			
Phone (if different from above):		Fax (If different fr	om above):			
2. Name:	Title:		E-Mail:			
Phone (if different from above):		Fax (If different fr	om above):			
3. Name:	Title:		E-Mail:			
Phone (if different from above):		Fax (If different fr	om above):			
4. Name:	Title:		E-Mail:			
Phone (if different from above):		Fax (If different fr	om above):	(over)		

Industry Category:

(check approp	riate box)				
Agent		Buying Group		Distributor/Wholesaler	
Manufacturer		Service Provider		Trade Association	
Other					
(If applicant is	both a supplier and	d retailer, supplier membership fee is	applicable)		
Primary Produ	ct or Service:				
Branch Inform	ation (if applicable	1			
1. Address: _		_City:	Prov.:	Postal:	
Contact:		Ph.:	_Fax:	E-mail:	
2. Address: _		City:	Prov.:	Postal:	
Contact:		Ph.:	_Fax:	E-mail:	

Agreement

I/We hereby apply for supplier membership in the Lumber and Building Materials Association of Ontario and agree to be invoiced annually for and promptly pay the annual membership fee. It is understood that supplier members are voting members who can sit on the Board of Directors by invitation. As well, supplier members may also serve as a member or chair of an Association Committee.

It is agreed upon that I/We will abide by the Constitution and By-laws of the Association.

I/We also agree to have our business and contact information published in the annual LBMAO Directory App.

Name: (please print)	 Title: _		
Signature:	 _ Date: _		
Payment Information:	A		MasterCard
Card #:		Exp	biry:
Card Holder Name:			nature:
Card Holder e-mail for credit card receipt:			