



# 2019 Membership Form

## CANADIAN PRODUCE MARKETING ASSOCIATION

### Mission Statement

To enhance the market and facilitate the trade of fresh fruits and vegetables for members.

### MEMBERSHIP CLASS SUB-CATEGORIES

#### Regular Member: \$1,320.00 (+ applicable taxes)

- For all businesses involved in the produce supply chain including, but not limited to, growers/shippers, packers, marketers, importers, exporters, customs brokers, retailers, foodservice distributors, transporters, packaging operations, communication and printing companies.

#### Branch Member: \$720.00 (+ applicable taxes)

- For branch offices of Regular Members, where the company's address and contact is based at a different location than the head office. The company's legal trading name and activities must be the same as the Regular Member.

**Membership is valid for one year from the date dues are received by CPMA. Dues are non-refundable.**

**Please visit [www.cpma.ca](http://www.cpma.ca) for more information on CPMA's member programs and benefits.**

Note: If your business uses a different trading name for a subsidiary, division, etc., other than that of the registered regular member of CPMA, the subsidiary, division, etc., requires their own membership.

Prices are in effect from Nov. 1, 2018 to Oct. 31, 2019. Future fees subject to change as of Nov. 1, 2019. Membership renewal is on an anniversary date billing system.

### Privacy Policy

By completing this form you consent to the use of the personal information provided in accordance with CPMA's Privacy Policy. For more information regarding CPMA's Privacy Policy please visit our website at [cpma.ca](http://cpma.ca).

### cpma.ca

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# CPMA Membership Application Form - Companies based outside of Canada Excluding EU Countries

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

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

City: \_\_\_\_\_ Province/State: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

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

Website: \_\_\_\_\_ Social Media Accounts (Twitter, Facebook, Instagram, YouTube) : \_\_\_\_\_

The following will appear in the CPMA Membership Directory and other member information listings:

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Contact Telephone: \_\_\_\_\_ Ext: \_\_\_\_\_ Contact Email: \_\_\_\_\_

Please indicate your preferred language of communication:  English  French

From the list below, what do you consider your PRIMARY business type based on your primary source of revenue (please select only one):

- grower/packer/shipper  produce broker  trade association  importer  foodservice operator  wholesaler  exporter  
 government organization  transportation  foodservice distributor  retailer  customs broker  marketing organization  
 processor  floral  allied industry: \_\_\_\_\_

From the same list, what do you consider your SECONDARY business type (please select only one):

- None  grower/packer/shipper  produce broker  trade association  importer  foodservice operator  wholesaler  
 exporter  government organization  transportation  foodservice distributor  retailer  customs broker  
 marketing organization  processor  floral  allied industry: \_\_\_\_\_

If you have chosen a business type of grower/packer/shipper, importer, exporter, processor or wholesaler please indicate your top 5 commodities (e.g. apples):

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_ 5. \_\_\_\_\_

Date of Application: \_\_\_\_\_ Recommended by: \_\_\_\_\_

## MEMBERSHIP CLASS SUB-CATEGORIES AND FEES

Please select one of the following membership sub-categories:

### Sub-category and Rate (+GST if applicable\*\*)

- Regular Member: \$1,320.00  Branch Member: \$720.00

\*\*As a foreign entity, if you are registered for the purposes of the Goods & Services Tax (GST) in Canada we must charge you the tax.

Are you registered for the GST?  Yes  No

If yes, please declare your GST #: \_\_\_\_\_ (please contact CPMA for tax rates and total to be paid)

As a member of the Canadian Produce Marketing Association, I agree to abide by the Canadian Produce Marketing Association's by-laws, operating rules and procedures. Copies may be requested at the address below.

Signature: \_\_\_\_\_

## METHOD OF PAYMENT

**Application cannot be processed without payment.**

GST # 106846587

- Cheque  VISA  AMEX  MasterCard

Credit Card No.: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

CVV No.: \_\_\_\_\_ Cardholder's Name: \_\_\_\_\_

(3-4 Digit Code on back of card)

(Please Print)

Cardholder's Signature: \_\_\_\_\_

PLEASE SEND  
COMPLETED FORM TO

**Lyse McClelland**

Manager, Membership Development  
Canadian Produce Marketing Association  
162 Cleopatra Dr., Ottawa, ON, K2G 5X2  
Canada

Tel: (+1) 613-226-4187 ext. 232

Cell: (+1) 613-878-1334

Fax: (+1) 613-226-2984

lmcclelland@cpma.ca