

MEMBERSHIP TYPE (☑):

Ontario Petroleum Contractors Association Form 1 - Application for membership (FORM 1 & 2 MUST BE SUBMITTED FOR CONSIDERATION)

□ ACTIVE-Petroleum Contractor □ ASSOCIATE-Petroleum Related Industry

All information is required, incomplete forms will not be processed.

LEGAL NAME OF BUS	SINESS:							
TRADE NAME (IF DIF	FERENT):							
ADDRESS:								
CITY:		PROVING	CE:	POSTAL CODE:				
TELEPHONE:								
TELET TIONE.								
COMPANY WEB SITE	COMPANY WEB SITE: INCLUDE LINK ON OPCA WEB SITE? YES \(\Boxed{1}\) NO \(\Boxed{1}\)							
PLEASE CHECK:	CORPORATION□	PARTNERSHIP□	PROPRIETORSHIP□	YEARS IN BUSINESS:				
	TSSA CONTRACTOR	SSA CONTRACTOR REGISTRATION #			_ DATE GRANTED:			
	WORKPLACE SAFETY & INSURANCE BOARD (WSIB) #							
NUMBER OF EMPLOY	YEES:	NUMBER OF EMPLOY	YEES CERTIFIED IN:					
		PMH	PM1 PM2	2 PM3				
		CATHODIC PROTECT	TION					
NAME OF PRINCIPAL	. IN COMPANY		TITLE:					
NAME OF PRINCIPAL	. IN COMPANY		TITLE:					
			PCA REPRESENTAT					
DESIGNATE FIRST		id alternate, all corre	espondence will be sent to r ST NAME:	representatives listed below E-MAIL:				
ALTERNATE FIRST	NAME:	LAS	LAST NAME:					
L								
PAYMENT INFO	ORMATION: Membe	ership Fee: \$1130.0	00 (\$1000.00 + \$130.00 HS	ST OPCA Reg.No.873350029)			
	☐ Membership Application enclosed ☐ Sponsorship Form enclosed ☐ Cheque enclosed, payable to OPCA							
□ Visa / Maste				·				
			Expiry	mm yyyy /	CVV #			
	Card No. / / CVV # Cardholder: Signature:							
⊠ MAIL FORMS	S TO: 387 Mapleviev	พ Drive West, Barrie	e ON, L4N 9G4 Or email t	to info@opcaonline.org				

The undersigned has the authority to bind the Company and hereby agrees that the Company will abide by the Charter and By-laws of the Ontario Petroleum Contractors Association.



Ontario Petroleum Contractors Association Form 2 - Sponsorship

Required:

All applications for membership require sponsorship from three members of the Ontario Petroleum Contractors Association.

	(Applicant name)						
Sponsor #1							
	Sponsor's corporate name						
Contact		Signature					
Sponsor #2							
•	Sponsor	's corporate name					
Contact		Signature					
Sponsor #3							
		's corporate name					
Contact		Signature					
			and the membership fee, to the at Board of Directors meetings.				
OFFICE USE ONLY							
RECEIVED BY:	DATE:	CHQ#	ACCEPTED:				
HOLD FOR: DITS	SA REG NO TI WSIB NO	□ PAYMENT □ SPONS	ORS ENTERED:				