![MCj03561350000[1]]() Canadian Sealers Association

# 2017 Membership Application Form

CSA Number:

*(Please complete your personal information below)*

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

D/O/B: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: \_\_\_\_\_\_\_

 Day/Month/Year

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**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you a Sealer?**

If Yes: Commercial - Please check seal license status below:

 Professional Assistant Temporary

 Sealing Area of Residence: \_\_\_\_\_\_\_\_\_\_ (This area number can be found on your Seal License)

 Personal Use

If No: Associate Member Corporate Member

# Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Membership Rates

You do not have to be a Sealer to be a member in the Canadian Sealers Association. Annual membership fee is $25.00. Being a member will entitle you to $2,000.00 worth of accidental, life and dismemberment insurance at NO COST to you. You will be mailed your membership card and beneficiary card once we have processed your payment.

*This completed application must be returned with a cheque or money order payable to CSA in the amount of $25.00. Please return to the address below:*

#  *Canadian Sealers Association*

 *P.O. Box 8005*

*St. John’s, NL A1B 3M7*

# Please note that membership fees are non-refundable.

Thank you for your continued support of the Canadian Sealers Association

Canadian Sealers Association • P.O. Box 8005 • St. John’s, NL • A1B 3M7 • tel: 709-722-8195 • fax: 709-722-2061 • [www.sealharvest.ca](http://www.sealharvest.ca) • info@sealharvest.ca

Office Use Only: Paid \_\_\_\_\_\_\_\_ Receipt # \_\_\_\_\_\_\_\_\_\_\_\_\_

 Cheque Money Order Cash Paypal Rec. By \_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_