## 2022 Membership Application Form

Name:	CSA Number:
Address:	(Please complete your personal information below)
	Telephone Number:
	Email:
Postal Code:	D/O/B:
	Month/Day/Year
Are you a Sealer?	
If Yes:   Commercial - Please check sea	ıl license status below:
□ Professional	☐ Assistant ☐ Temporary
Sealing Area of Re	esidence: (This area number can be found on your Seal License)
☐ Personal Use	
If No: ☐ Associate Member ☐ Corpo	orate Member
	a member in the Canadian Sealers Association. The eque or money order in the amount of \$25.00 payable to <i>n</i> (CSA)
You will be mailed your membership card once we	e have processed your payment.
Please note that membership fees are non-refundal	ble.
Signature of Applicant:	Date:
Thank you for your continued su	pport of the Canadian Sealers Association
Office Use Only:  ☐ Cheque ☐ Money Order ☐ Cash	Paid Receipt # □ Paypal Rec. By Date