



MEMBER AND PARTNER APPLICATION

Please print the following application and send along with payment to:

Canadian Special Crops Association
1215 - 220 Portage Avenue
Winnipeg, MB, R3C 0A5
Tel: (204) 925-3780 Fax: (204) 925-4454
E-mail: office@specialcrops.mb.ca

Be a Part of the Results and Rewards of the CSCA

① Members

Voting members of the CSCA are Canadian individuals, partnerships, corporations or other legal entities engaged in the growing, export, merchandising or brokerage of whole, split, flours and fractions of pulses and special crops.

Regular Members

Regular Member fees are \$1,500/year. All members are encouraged to make additional targeted contributions to project areas of interest. Members are featured on the CSCA website, and have voting privileges.

Gold Members

Gold Members contribute a minimum of \$5,000/year, which includes the CSCA Membership fee of \$1,500/year. Gold members are featured prominently on the CSCA website, have voting privileges, and receive customized reports on results.

② Partners

CSCA Partners are individuals, partnerships and corporations, including international companies, with an interest in the CSCA, and/or an interest in connecting with other CSCA members and partners. The CSCA is accountable to partners and is committed to providing value and delivering results. Partners are not voting members of the association.

Regular Partners

CSCA Partners pay a partnership fee of \$1500/year. All partners are encouraged to make additional targeted contributions to project areas of interest. Partners are listed on the CSCA website.

Gold Partners

Gold Partners contribute a minimum of \$5,000/year, which includes the CSCA Partners Fee of \$1,500/year. Gold Partners are able to choose the projects and initiatives they wish to support with their "Gold" partner contributions. 100% of their Gold investment will flow towards designated targets. Partners making targeted contributions receive reports on results.

③ Affiliations for Other Associations

Other associations, and 'not for profit' organizations, may become a CSCA Partner Organization for an annual fee of \$200/year. Non Profit Partners are listed on the CSCA website.

All memberships are subject to GST/HST as applicable.

This application is hereby made for registration of:

Check One	Categories	Membership fee	Targeted Project Contributions
	Voting Category- Members		
	Members – <i>Gold</i>	\$5,000/year	Minimum of \$3,500/year
	Members – <i>Regular</i>	\$1,500/year	\$100-\$3,499/year (optional)
	Non-Voting Categories		
	Partners - <i>Gold</i>	\$5,000/year	Minimum of \$3,500/year
	Partners - <i>Regular</i>	\$1,500/year	\$100-\$3,499/year (optional)
	Affiliations / Not for Profit Organizations	\$200/year	\$100-\$3,499/year (optional)
<i>All fees are in Canadian funds, subject to GST/HST</i>			

Under the By-laws of the Canadian Special Crops Association Inc. (the "CSCA") and the following statements of fact are made in respect thereof:

I - Particulars of Applicant

a) If an individual:

Name: _____

Business Name: _____

Address: _____

City: _____ Province/State: _____

Postal Code: _____ Country: _____

Telephone: _____ Fax: _____

E-mail: _____

Website: _____

Do you wish your company website to be linked from the CSCA website?

Yes

No

b) If a corporation:

Full Business Name: _____

Incorporated under the laws of: _____

on _____, 19 _____

Names and addresses of Principal Officers:

President: _____

Vice-President: _____

Head Office Address: _____

Telephone: _____ Fax: _____

City: _____ Province/State: _____

Postal Code: _____ Country: _____

E-mail: _____

Website: _____

The corporation is:

- Independently owned
- A wholly-owned subsidiary of _____
and effective control of the corporation is exercised by _____

c) If a partnership:

Firm Name: _____

Firm consists of the following partners: _____

Firm commenced business on the _____ day of _____, 20_____

under the laws of _____

Head Office Address: _____

Telephone: _____ Fax: _____

City: _____ Province/State: _____

Postal Code: _____ Country: _____

E-mail: _____

Website: _____

Do you wish to have your company website linked from the CSCA website?

- Yes
- No

II - Designated representative to CSCA

Name: _____

Position: _____

Address: _____

Telephone: _____ Fax: _____

City: _____ Province/State: _____

Postal Code: _____ Country: _____

E-mail: _____

PRIVACY POLICY Effective Jan. 1, 2004, all organizations that collect, use or disclose personal information about their customers and/or employees in the course of their commercial activities are subject to Privacy Legislation. The CSCA is committed to protecting personal information provided by all members. By submitting this application, you are providing us with consent to use the information to better understand your interest in our products and services, and inform you about those that may interest you, among other purposes.

When you submit this application, your contact information is used primarily to communicate with you about the CSCA services and activities. Your contact information may also be used to notify you of our events in the future. You may opt out of these mailings at any time by contacting our office. Your name, email address and mailing address will also appear on CSCA website, Trade manual and membership lists. Your personal information is never released directly to the third parties.

If you do not wish your contact information to be posted on our website, please check the following box:

Please do not include my address, phone & fax numbers, e-mail address on CSCA web site.

III - References

Please note that all companies applying for **CSCA Member Category** will submit TWO WRITTEN REFERENCE LETTERS from current CSCA Members (Gold or Regular) in support of their application.

IV - Undertakings of Applicant

We hereby declare that:

a) _____ the person named herein as our designated representative and whose signature appears below, is duly authorized to represent us as a member of the CSCA and to exercise any voting privileges (if applicable) attached to our membership classification at meetings of the members of the CSCA, and his/her authority shall continue until such time as you shall receive and acknowledge receipt of notice of our revocation of such authority.

Signature of Designated Representative: _____

b) We have read and fully understand the CSCA Code of Conduct and agree to abide by all expectations and conduct regulations.

Signature of Designated Representative: _____

b) The statements of fact made in this application are true in substance and in fact.

Signature of Designated Representative: _____

V – Company Information

a) Please provide a detailed description of your company operations and commodities marketed if applicable:

b) Please provide reasons why you want to join the CSCA?

(Please use additional sheet(s) of paper, if necessary)

VI - Membership Roster Information

COMPANY:

Please indicate which categories describe your business:

- | | | | |
|--------------------------------------------------------|--------------------------------------------|----------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Pulse/Special Crops Processor | <input type="checkbox"/> Exporter | <input type="checkbox"/> Toll Processor | <input type="checkbox"/> Importer |
| <input type="checkbox"/> Broker | <input type="checkbox"/> Food Manufacturer | <input type="checkbox"/> Railway | <input type="checkbox"/> Steamship line |
| <input type="checkbox"/> Freight Forwarder | <input type="checkbox"/> Stuffing Facility | <input type="checkbox"/> Port | <input type="checkbox"/> Industry Association |
| <input type="checkbox"/> Consulting Company | <input type="checkbox"/> Service Provider | <input type="checkbox"/> Inspection Services | <input type="checkbox"/> Other (please provide details) |

Please list the pulse and special crops products your company markets:

Designated Representative _____

Signing Officers of Applicant _____

Dated at _____, this day of _____, 20_____