



**CRANE RENTAL**  
ASSOCIATION OF ONTARIO

**APPLICATION FOR ACTIVE MEMBERSHIP**

I/We hereby apply for membership in the **Crane Rental Association of Ontario**, with all the rights and privileges pertaining thereto, and if selected agree to conform to the By-Laws enacted or to be enacted, for the governance of its members. I/we agree to be a party to the collective agreement between the Association and the International Union of Operating Engineers, Local 793.

**COMPANY:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **PROVINCE:** \_\_\_\_\_ **POSTAL CODE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**WEBSITE:** \_\_\_\_\_

**REPRESENTATIVE/TITLE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**ADDITIONAL REPRESENTATIVE (S):** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**TYPE OF BUSINESS:** \_\_\_\_\_

**ACTIVE MEMBERSHIP FEE**

**MEMBERSHIP DUES: \$350.00**

**HST 13%: \$45.50**

**TOTAL: \$395.50**

**(Crane Rental HST Reg. No. R124357757)**

**Payment by cheque to:**

**Crane Rental Association of Ontario**

**70 Leek Crescent, Richmond Hill ON L4B 1H1**

**Payment by credit card (VISA/MASTERCARD):**

**Credit Card #:** \_\_\_\_\_

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

**Expiry Date (MM/YY) :** \_\_\_\_\_

**Email Address to Send Receipt:** \_\_\_\_\_

**Submit application to: Betty Quan, Administrator, at [bquan@tcaconnect.com](mailto:bquan@tcaconnect.com)**