



Canadian Institute of Plumbing & Heating  
L'Institut canadien de plomberie et de chauffage

A National Voice With Regional Roots | Une histoire régionale, une voix nationale

## APPLICATION FOR MEMBERSHIP

### CANADIAN-BASED ASSOCIATE MEMBER: SERVICES

The undersigned hereby applies for membership in the Canadian Institute of Plumbing & Heating/L'Institut canadien de Plomberie et de Chauffage and, if accepted, agrees to comply with all the provisions of the By-Laws of the Institute. The undersigned agrees to pay annual dues in accordance with the schedule approved by the Board of Directors of the Institute.

- Please return your application with cheque for the amount you have calculated.
- A dues calculation form is provided.
- Dues are payable each May 1<sup>st</sup>.
- The Institute's fiscal year is May 1<sup>st</sup> to April 30<sup>th</sup>.
- The CIPH Board of Directors will review your application at the next Board Meeting.
- If your application is not accepted, a full refund will be made.

#### ARTICLE 11.04 - MEMBERSHIP

##### Section 4. Associate Members (Non-voting) - Services

##### 1) ASSOCIATE MEMBER: SERVICES

Any Person being a Canadian corporation shall be eligible to become an Associate Member (Non-Voting) provided an important portion of his business revenue is derived from the supply of the industry services to the Canadian Plumbing and Heating Industry. Such member shall not be directly engaged in the installation of or sales to consumers of plumbing and heating products.

Eligible Services are:

- 1) Pricing Services
- 2) Industry Publications
- 3) Product Certification Services
- 4) Data Services
- 5) Hydronics Specialists

Please complete the following form:

Company			
Address			
City	Province	Postal Code	
Telephone	Fax	Other	
E-mail		Web Site	
1. President of Company			
2. Applicant Name		Position	
3. Signature		Date	
4. a) Which of the following eligible services is the company supplying?			
<input type="checkbox"/> Pricing Service	<input type="checkbox"/> Industry Publication	<input type="checkbox"/> Product Certification Service	<input type="checkbox"/> Data Services
b) Hydronics Specialists			
<input type="checkbox"/> Specialty Distributor	<input type="checkbox"/> Designer	<input type="checkbox"/> Training Professional	
<input type="checkbox"/> Engineering Service	<input type="checkbox"/> Systems Prefabricator		

...continued

**APPLICATION FOR MEMBERSHIP: ASSOCIATE MEMBER: SERVICES**

*(please check where appropriate )*

5. As part of its business does the company:

a) Install products?

YES  NO

b) Sell products to the consumer?

YES  NO

6. How many people does the company employ in Canada?

1-5

5-10

10-15

More than 15

7. a) Date company established?

Year:

b) How long has it been under the present ownership?

Years:

c) Is it registered or incorporated in Canada?

YES

Federally

Provincially

NO

8. Is the company affiliated with any other Canadian company?

YES

NO

Is that company in the plumbing and heating industry?

YES

NO

If yes, please give the name and explain the relationship:

9. Canada's Anti-Spam Legislation fulfillment: "Yes, I agree to receive e-communications from CIPH":

10. List key employees of the company or attach a list:

Name

Title

Location and Email

Name

Title

Location and Email

Name

Title

Location and Email

11. To assist the CIPH Membership Committee with their recommendation to the CIPH Board, please indicate the top three reasons why you want to become a member of the Institute or attach a list.  List Attached

1.

2.

3.

**THANK YOU FOR APPLYING FOR MEMBERSHIP IN CIPH!**

**THE CIPH BOARD OF DIRECTORS WILL REVIEW YOUR APPLICATION AT THE NEXT BOARD MEETING**

*Thank you!*

**Canadian Institute of Plumbing & Heating**

295 The West Mall, Suite 504, Toronto, ON M9C 4Z4

Tel: 416 695 0447 ■ Fax: 416 695 0450 ■ Web Site: [www.ciph.com](http://www.ciph.com)



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## 2018/2019 DUES CALCULATION FORM

### CIPH ASSOCIATE MEMBER SERVICES

- The following dues schedule has been approved by the Board of Directors of CIPH
- Effective May 1, 2018 for the CIPH fiscal year May 1, 2018 to April 30, 2019
- Dues are payable May 1 or with your application for CIPH Membership

<b>1. ELIGIBLE SERVICES</b> <i>(please check where appropriate <input checked="" type="checkbox"/>)</i>	
<input type="checkbox"/> Pricing Service	\$ 1,000
<input type="checkbox"/> Industry Publication	\$ 1,000
<input type="checkbox"/> Product Certification	\$ 1,000
<input type="checkbox"/> Data Services	\$ 1,000
<b>ELIGIBLE HYDRONICS SPECIALIST</b>	
<input type="checkbox"/> On Sales of over 1 million	\$ 1,172
<input type="checkbox"/> On Sales of \$500,000 - 1 million	\$ 850
<input type="checkbox"/> On Sales under \$500,000	\$ 350
<b>2. ANNUAL DUES/SUBTOTAL</b> (total of applicable categories in Item 1)	
	\$
<b>3. PLUS GST/HST per Province of origin</b> (calculated on Item 2) Registration #10686 1669RT	
<input type="checkbox"/> AB-5% <input type="checkbox"/> BC-12% <input type="checkbox"/> MB-13% <input type="checkbox"/> NB-13% <input type="checkbox"/> NL-13% <input type="checkbox"/> NT-5% <input type="checkbox"/> NS-15% <input type="checkbox"/> ON-13%	\$
<input type="checkbox"/> PE-14% <input type="checkbox"/> QC-14.975% <input type="checkbox"/> SK-10% <input type="checkbox"/> NU-5% <input type="checkbox"/> YU-5%	
<b>4. TOTAL 2018/2019 DUES</b> (Item 2 plus Item 3)	
	<b>\$</b>
DATE PAID:	

**A COPY OF DUES CALCULATION FORM AND PAYMENT  
MUST ACCOMPANY YOUR APPLICATION**

SIGNING OFFICER:

SIGNATURE:

COMPANY:

ADDRESS:

**PAYMENT OPTIONS**

*(please check where appropriate )*

To pay by credit card, please fax CIPH at 416 695 0450

VISA

MASTERCARD

CHEQUE

(Please print)

Card Holder Name

Signature

Card Number

Exp. Date

CVV # (back of credit card)

PLEASE RETURN A COPY WITH YOUR PAYMENT AND KEEP A COPY FOR YOUR RECORDS OF HST PAID .... *Thank you!*

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