

## **INDIVIDUAL**

## MEMBERSHIP APPLICATION FORM

PAPPLICATION FORM							
Date of Application (mm/dd/yyyy)	Applicant name: Mr. / Ms. / Mrs.						
Diagram		F:I					
Phone		Email					
Address							
					2 16 1 77 6 1		
City				Postal Code / Zip Code			
Mailing Address: (if different from above)							
			I				
City			Province / State		Postal Code / Zip Code		
MEMBERCHIR							
▶ MEMBERSHIP			Dutain	_	Cumutad		
Special price valid for 1 year			Pricing		<b>Granted</b> 1 membership		
* Special price during Covid-19 time. Regular price is \$175			\$85 CAD +	taxes	T membersing		
Special price during Govid to diffe. Megalai price to \$170							
All incoming applicants will be reviewed by the AmCham Québec Membership committee and approved applications must be ratified by the Board of Directors.  The American Chamber of Commerce in Canada is a premium business focused organization. As such we hope to have a high level							
of input and attendance from owners, directors, senior managers, key government officials and valued stakeholders in each member organization.							
To gain an understanding of applicants and members of AmCham Quebec, we are requesting that our accompanying questionnaire be completed.							
By applying to AmCham Quebec you agree to receive our electronic notifications and reminders of various events and activities.							
APPLICATION SUBMISSION TO INCLUDE							
A business-style headshot for each listed executive member in electronic format (optional)							



## INDIVIDUAL MEMBERSHIP APPLICATION FORM

PAYMENT SUBMISSION		
Credit Card payment upon invoice rec  Cheque is attached. Payable to: Amo		
Return this application along with you	ır payment by mail:	
C/O Lucie Nolette 138, rue Lacoste Shefford, QC J2M 1V8	By email:	Inolette@amchamquebec.com
Note: A cheque must be submitted with ap	oplication, and will be	returned if application is not accepted.
		of any personal information relating to my ng the AmCham records and websites"
Signature:	Pr	int Name:
Title:		