****

**Canadian Raw Materials Council (CRMC)**

**Membership Application Form**

|  |  |
| --- | --- |
| **Applicant Type (Please Check One):** |  |
| [ ] Industry Member |  |
| [ ] Associate Member |  |
| [ ] Academic & Research Member |  |
| [ ] Government & Regulatory Member |  |
| [ ] Student & Young Professional Member |  |
| [ ] Honorary Member |  |
| [ ] Other (Please specify): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| **1. Applicant Information** |  |
| Full Name / Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Contact Person (if applicable): | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Position / Title: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Mailing Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province/Territory: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Postal Code: \_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Website (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **2. Industry Affiliation** |  |
| [ ] Mining |  |
| [ ] Forestry |
| [ ] Agriculture |  |
| [ ] Manufacturing |  |
| [ ] Research & Development |  |
| [ ] Policy & Advocacy |  |
| [ ] Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| **3. Membership Category & Fees** |  |
| [ ] Industry Member – $500 per year |  |
| [ ] Associate Member – $200 per year |
| [ ] Academic & Research Member – $300 per year |
| [ ] Government & Regulatory Member – $1500 per year |
| [ ] Student & Young Professional Member – $100 per year |
| [ ] Honorary Member – By Nomination / Invitation Only |
|  |
| **4. Brief Description of Your Organization (If Applicable)** |
| (Please provide a short description of your organization’s activities, key focus areas, and interest in the CRMC.) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |
| --- | --- |
| **5. Reason for Joining CRMC** |  |
| [ ]  Networking Opportunities |  |
| [ ]  Industry Advocacy |  |
| [ ]  Access to Research & Reports |  |
| [ ]  Training & Development |  |
| [ ]  Policy Collaboration |  |
| [ ] Other (Please specify): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| **6. Declaration** |  |
| I/we hereby apply for membership with the Canadian Raw Materials Council and agree to abide by its regulations and policies. I confirm that all the information provided is accurate to the best of my knowledge |
|  |  |
| **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| **7. Payment Information** |  |
| [ ] E-Transfer |  |
| [ ]  Credit Card (Visa / MasterCard) |
| [ ]  Invoice Request / other |  |
|  |  |
| **For payment instructions, please contact:** info@cacermdi.ca  |
|  |  |
| **8. Submission** |
|  |  |
| Please submit the completed form to info@cacermdi.ca or mail it to **P. O. Box 1263, Prince Albert, S6V 5S8, Saskatchewan, Canada**For further inquiries, contact us at**📞+1 306 900 9336 | +1 306 992 2198 📠 Fax: +1 306 993 9718 | 📞 Toll-Free: +1 866 275 0224** or visit <https://cacermdi.ca/call-for-membership/>. |
|  |  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |  |
|  |  |