

### Corporate Information :

Company Name :

Services :

### Main Address :

Street :

Province :

Postal Code :

Company Telephone :

Company Fax :

Website :

Corporate Parent (if applicable) :

Country of Origin :

Canadian Privately Owned :

Affiliated Canadian Companies (if applicable) :

### Chief Executive Officer / Most Senior Canadian Executive :

Name :

Title :

Address :

Telephone :

ext.

Fax :

Email :

Assistant :

Telephone :

ext.

Fax :

Email :

### Catégorie de membre :

Please indicate the level of membership you are applying for:

Affiliate \$5K/year  Partner \$15K/year (Plus 5% GST)

Date:

Signature: Chief Executive Officer / Most Senior Canadian Executive :

**PLEASE RETURN THIS FORM TO FCPC WITH A CHEQUE FOR MEMBERSHIP FEES PAYABLE TO:  
FOOD & CONSUMER PRODUCTS OF CANADA**