

CONTRACTOR APPLICATION FOR MEMBERSHIP

I (We) hereby apply for membership in the Saskatchewan Masonry Institute Inc. with all the rights and privileges pertaining thereto and, if accepted, agree to conform to the bylaws of the said Institute.

Application Date: _____

Company Name: _____

Phone: _____

Address: _____

Fax: _____

City/Town: _____

Postal Code: _____

Website: _____

Contact: _____ Email: _____

Cell: _____

Applicant's Name: _____

Position: _____

Applicant's Signature: _____

Commenced Business In: _____

Membership Fees:

- Contractor \$440.00 (Includes CMCA Membership fee) plus \$0.50 per hour worked for all employees to SMI and \$0.05 per hour to CMCA (plus GST). Unionized firms to remit through union agreement.
- ** Application must be accompanied by letter of referral from a Saskatchewan Architect, a Saskatchewan Engineer and a Saskatchewan Commercial Contractor.
- ** Application must be accompanied by list of 5 projects completed along with contact information for Architect, Engineer and General Contractor.
- ** All Contractor members must employ at least 1 Journeyman Bricklayer. Please provide Red Seal Certificate numbers and # of Journeymen and # of Apprentices employed.

Subtotal _____

GST (5%) _____

Total Membership Fee _____

NOTE: Memberships and liability for project dues can be cancelled only in writing, prior to cancelling and after all said dues in arrears are paid.

SMI OFFICE USE ONLY:

This Membership Application is sponsored by the following members of the Saskatchewan Masonry Institute Inc. who affix their signature hereto:

Signature

Firm Name

Signature

Firm Name

Approved by the Board of Directors on _____

President's Signature _____

GENERAL CONDITIONS AND PROCEDURES OF MEMBERSHIP APPLICATION

- 1) Applicant must be actively engaged in the Masonry Industry
- 2) Applicant must agree to be governed by the Code of Practice as adopted by the Saskatchewan Masonry Institute Inc.
- 3) Memberships are not prorated and are renewable at the end of each calendar year, regardless of the date of application.

Project References:

Project # _____ of 5:

Name of Project: _____

Street Address: _____

City/Town: _____

Architect: _____

Address: _____

City: _____ Postal Code: _____

Contact: _____ Phone: _____

Email: _____

Engineer: _____

Address: _____

City: _____ Postal Code: _____

Contact: _____ Phone: _____

Email: _____

General Contractor: _____

Address: _____

City: _____ Postal Code: _____

Contact: _____ Phone: _____

Email: _____