

How/from whom did you hear about CCI? Referral (provide name) _____
Online Search Social Media (please specify) _____
Other (please specify) _____

INDIVIDUAL MEMBERSHIP

CONTACT INFORMATION:

Name: _____
Condo Name / Number _____
Address: _____
City: _____ Province: _____ Postal Code: _____
Phone: _____ Email: _____

This section must be completed in order for the membership application to be processed. CCI communicates with its membership via e-mail regarding updates on condominium legislation, CCI events and opportunities, newsletters, and member communications; in accordance with the Canada anti-spam law, you must indicate whether you wish to receive electronic correspondence from us.

I AGREE to receive electronic correspondence I DO NOT wish to receive any electronic correspondence

Signature _____ Date: _____

Half Year Fee: \$50 + \$2.50 GST = **\$52.50**

METHOD OF PAYMENT:

Cheque Credit Card*

*Office will contact you with payment portal link and further information to make payment online.

Cheques should be made payable to:

Canadian Condominium Institute - North Alberta Chapter
#102, 8925 82 Ave NW, Edmonton, AB T6C 0Z2
Tel: 780.453.9004 • Fax: 780.452.9003
Email: info@ccinorthalberta.com
Website: www.ccinorthalberta.com