

ORGANIZATION INFORMATION		
<b>Company Name:</b>	<b>Phone:</b>	
<b>Email:</b>	<b>Extension:</b>	
<b>Mailing Address:</b>		
<b>City:</b>	<b>Province:</b>	<b>Postal Code:</b>
<b>Contact Person:</b>		

MEMBERSHIP FEES (Valid from May 1 <sup>st</sup> 2019- April 30 <sup>th</sup> 2020)								
	ON	QC	NB/NS	MB	PE	AB / NT/ YT	SK	BC
Membership Fee \$50.00 before tax								
Membership Fee including taxes	\$56.50 <input type="checkbox"/>	\$52.50 <input type="checkbox"/>	\$57.50 <input type="checkbox"/>	\$56.00 <input type="checkbox"/>	\$57.50 <input type="checkbox"/>	\$52.50 <input type="checkbox"/>	\$52.50 <input type="checkbox"/>	\$56.00 <input type="checkbox"/>
<b>Applicable taxes for Membership fees</b>	BC 7% PST+ 5% GST AB, QC, NT, YT, SK 5% GST		MB 7% PST + 5% GST NS, NL, NB 15% HST		ON 13% HST PE 15% HST			

PAYMENT INFORMATION	
<input type="checkbox"/>	<b>Cheque (Payable to Sonography Canada; post-dated cheques will NOT be accepted)</b>
<input type="checkbox"/>	<b>Money Order</b>
<input type="checkbox"/>	<b>MasterCard</b>
<input type="checkbox"/>	<b>Visa</b>
<b>Amount: \$</b>	
<b>Credit Card Number:</b> -      -      -	<b>Expiry Date:</b> / <b>CVV Number:</b> _____
<b>Name as it appears on the Credit Card: (please print)</b> _____	<b>Signature of Cardholder:</b> _____

Would you like to receive email correspondence about Conferences, jobs, and other opportunities? Yes  No

**Please forward your completed application to the address provided below:**

PO Box 1220, Kemptville, ON K0G 1J0  
 Toll Free Phone: 1-888-273-6746 Toll Free Fax: 1-888-743-2952  
[info@sonographycanada.ca](mailto:info@sonographycanada.ca) [www.sonographycanada.ca](http://www.sonographycanada.ca)