

APPLICATION FOR SUPPORTER MEMBERSHIP - RENEWAL

1. Complete the following company information

Company Name			
Street Address			
City/Town	Province	Postal Code	
Contact Name			
Company PHONE ()	Company FAX ()		
Email:	WCB Firm # WCB Rate Code		

2. Check off company TYPE

	Saskatchewan Based: Non-Construction
	Outside Saskatchewan: Construction
	Outside Saskatchewan: Non-Construction

3. Check off company SIZE

	1 to 10 employees
	11 to 50 employees
	Over 51 employees

4. Date and sign the certification statement below

I certify that the information on this form is true and correct.

Signature: _____

Name: *(Please print)* _____ Date: _____

5. Send this completed form and payment (\$750 + 5% GST = \$787.50) to

SCSA Regina Head Office, 498 Henderson Dr.; REGINA SK S4N 6E3

FOR SCSA OFFICE USE ONLY	
AUTHORIZED BY: <hr/> Date: _____	Supporter Membership Term: From: _____, 20__ to _____, 20__

