



Membership Application

Taking the Canadian industry to *New Heights!*

COMPANY INFORMATION

Company name: _____
Street address: _____
City: _____
Province: _____ Postal Code: _____
Website: _____
Business email: _____
Phone: _____
Toll-free phone: _____ Cell: _____

BRANCH ADDRESS

Store name: _____
Address: _____
City: _____
Province: _____ Postal Code: _____
Phone: _____ Cell: _____
Contact person: _____
Title: _____
Email: _____

MAILING ADDRESS

Address: _____
City: _____
Province: _____ Postal Code: _____

DESIGNATED REPRESENTATIVE

Name: _____
Title: _____
Email: _____
Phone: _____ Cell: _____

BRANCH ADDRESS

Store name: _____
Address: _____
City: _____
Province: _____ Postal Code: _____
Phone: _____ Cell: _____
Contact person: _____
Title: _____
Email: _____

COMPANY CONTACTS

Marketing: _____
Email: _____
Risky Management/Safety: _____
Email: _____
Human Resources: _____
Email: _____
Accounting: _____
Email: _____

Legislative: _____
Email: _____
Education/Training: _____
Email: _____
Insurance: _____
Email: _____
Store Manager: _____
Email: _____

MEMBERSHIP DUES

Dues	Total Branches
<input type="checkbox"/> \$450	1 Branch
<input type="checkbox"/> \$650	2-5 Branches
<input type="checkbox"/> \$1050	6-9 Branches
<input type="checkbox"/> \$1450	10 + Branches

All membership dues must be paid in CANADIAN dollars.

Take advantage of the many benefits of membership and join today by completing this application. The information you provide will allow CRA to best serve your interests and needs. Please type or print and complete all sections. An online application and overview of member benefits are available at CRArental.org. Fax this form to 905-643-3999 or email membershipservices@crarental.org. Questions? Call 905.643.2333.

Mail to: Canadian Rental Association, 217-1100 South Service Road, Stoney Creek, ON, L8E 0C5 | Fax: 905.643.3999

DEMOGRAPHIC INFORMATION

Business organization:

- Corporation Sole Proprietorship
 Partnership

What best describes your business?

- Equipment Rental
 Event Rental
 Distributor/dealer with rental

In what year was your firm started? _____

In what year did you enter the rental industry? _____

Is your company family-owned? Yes No

Number of full-time staff: _____

Your total annual rental revenue: _____

Your rental inventory by percentage:

Construction/industrial _____%

General tool/homeowner _____%

Party/special event _____%

Not represented above*

*Please specify _____

YOUNG PROFESSIONAL NETWORK

Do you have young rental professionals, ages 18-40, who are interested in participating in the CRA Young Professionals Network? Yes No

If yes, please list their names and email addresses: _____

REASONS FOR JOINING

How did you hear about CRA? (Please select one.)

- Member referral Local meeting
 The CRA Show promotion Membership promotion
 CRA Insurance Reinstatement/Past member
 Other _____

What is your No. 1 reason for joining CRA?

- Insurance New to rental resources
 Industry affiliation/trends CRA Show and Events
 Associate member referral Equipment discount
 Networking Product or service
 Other _____

INSURANCE

Are you interested in information about CRA Insurance? Yes No Current insurance agency: _____

Insurance expiration date (MM/DD/YYYY): _____

SOFTWARE

Do you utilize rental (POS) software? Yes No If so, which provider do you use? _____

As a member, you will receive access to Canadian-specific rental benefits, including the regional trade shows, insurance, credit card processing, CRA Source Magazine and more



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Stoney Creek, Ontario L8E 0C5 Canada
905.643.2333 • 844.643.2333
Fax: 905.643.3999
CRARental.org

PAYMENT INFORMATION

If you pay with credit card, CRA will continue your membership without interruption unless you tell us otherwise. At the end of the initial membership term and before the start of your new term, CRA will simply charge your credit card at the dues rate in effect at that time. Should terms or rates change, CRA will notify you in advance. If CRA cannot charge your credit card, the association will send you a bill for your dues. To opt out of this membership offer, check the box below:

I choose to opt out of the ability to continue my CRA membership via the above-mentioned credit card payment system.

Check or money order enclosed. Please charge my: Visa MasterCard

Credit card number: _____ Expiration Date: _____

Name: (as it appears on card) _____

Signature: _____ Date: _____

I understand that my membership is not official until it is approved by CRA.