

Provincial Towing Association (Ontario) Inc.

"The Association for Towing Professionals"

65 Keith Road, Bracebridge, Ontario P1L 0A1

Phone 705 646-0536 or 866 582-0855 Fax 705 645-0017

ASSOCIATE MEMBERSHIP APPLICATION

<u>Associate Membership</u> in the association is open to those who supply goods and/or services to those in the towing business. Associate membership dues are \$500 per year.

To become an Associate Member, complete and sign this form and return it to the PTAO office, along with your cheque or credit card number for your dues for the year. Cheques may be made payable to Provincial Towing Association (Ontario) Inc.

Company Name:			
Owner/Officer - Full Name:			
City/Town:		P/C:	
County or District:			
Business Phone: ()	Fa	x: ()	
E-mail address:	Web Site: _		
Company Representative: _			
Alternate Representative: _			
understand and agree that this mem statement upon a majority vote of the reproduce the logo are the proprieta for the term of membership. Terminany form. The Association decal is of Ontario.	bership can be terminated with or without respectively. All decals and patch are property of Provincial Towing Association of membership terminates the right a Service Mark Logo of Provincial Towing	ws of the Provincial Towing Association (Ontario) Inc. I notification to me for any violation of the bylaws or mission less bearing the Association logo or insignia and the rights to ion (Ontario) Inc. Payments for decals or patches are a lease to use or possess any such PTAO sign, name or insignia in g Association (Ontario) Inc., duly registered in the Province	
Applicant's Signature:		Date:/	
Cheque enclosed [] Yes [] N			
Credit Card #	Ex	piryVisa [] MC []	
	Office use only	,	
Date of Application	Date Approved	Date Paid	
Member Number	Affiliation	Zone	