



Vancouver Maritime Arbitrators Association

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Corporate Supporting Membership Application

Company Name: _____

Street Address: _____

Mailing Address (if different from above): _____

Type of Business: _____

Name of our Chief Executive Officer: _____

Title: _____

Phone: _____

Email: _____

Name of Staff Member nominated as an Individual Supporting Member:

Name: _____

Title: _____

Phone: _____

Email: _____

Our General Email address for announcing upcoming Seminars:

Email: _____

Please send us () copies of your newsletter the 'Resolution'.

Please enclose the annual membership fee of \$ 250.00

Cheque payment to follow by mail. Please issue cheque in favour of Vancouver Maritime Arbitrators Association.

Charge my credit card # _____ Expiry ____ / ____

Card Holder's Name _____

Card Holder's Signature _____