



Membership Application Form

Membership Type:

- Active – Petroleum Contractor Associate – Petroleum Related Industry

Member Information

Legal Name of Business _____

Trade Name (if different) _____

Contact Person _____

Address _____

City _____ Province _____ Postal Code _____

Telephone _____

Fax _____

Email Address _____

Company Website _____ include in BCPCA directory

corporation partnership proprietorship

Years in Business _____

Name and Title of Principal(s) _____

Name and Title of Principal(s) _____

Name and Title of Principal(s) _____

Employee Information

Number of Employees _____

Payment Information

Annual Membership Fees

Active – \$500.00 plus HST (\$560.00)

Associate – \$300.00 plus HST (\$336.00)

Cheque enclosed. *Please make cheques payable to BCPCA.*

Please mail Membership Application Form and Payment to BCPCA:

102 - 211 Columbia Street

Vancouver, BC V6A 2R5

Office Use Only

Received by _____ Date _____ Member Number _____

Cheque Number _____

Accepted Yes No