



# MEMBERSHIP APPLICATION

## CONDOMINIUM CORPORATION

ccinewfoundland@cci.ca • www.cci.ca/Newfoundland

Membership to June 30, 2018

How/from whom did you hear about CCI?: \_\_\_\_\_

### CONDOMINIUM CORPORATION

Condo Name/Number: \_\_\_\_\_

Number of Units: \_\_\_\_\_ Registration Date: \_\_\_\_\_

Development Style: ☐ Townhouse ☐ Apartment Style ☐ Other: \_\_\_\_\_

Address: \_\_\_\_\_ Suite #: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

☐ I agree to receive electronic correspondence.

☐ I DO NOT wish to receive electronic correspondence.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### MANAGEMENT COMPANY

Primary Contact: \_\_\_\_\_

Address: \_\_\_\_\_ Suite #: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

☐ I agree to receive electronic correspondence.

☐ I DO NOT wish to receive electronic correspondence.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please forward all correspondence to: ☐ Management Company address ☐ Condo Corporation address

### Electronic Correspondence:

**This section must be completed in order for the membership application to be processed.**

CCI communicates with its membership via e-mail regarding updates on condominium legislation, CCI events and opportunities, newsletters, and member communications; in accordance with the Canada anti-spam law, you must indicate whether you wish to receive electronic correspondence from us.

### BOARD MEMBERS

Board Member 1 Name: \_\_\_\_\_

Board Member 1 Email: \_\_\_\_\_

☐ I agree to receive electronic correspondence.

☐ I DO NOT wish to receive electronic correspondence.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Board Member 2 Name: \_\_\_\_\_

Board Member 2 Email: \_\_\_\_\_

☐ I agree to receive electronic correspondence.

☐ I DO NOT wish to receive electronic correspondence.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Board Member 3 Name: \_\_\_\_\_

Board Member 3 Email: \_\_\_\_\_

☐ I agree to receive electronic correspondence.

☐ I DO NOT wish to receive electronic correspondence.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### FEES & PAYMENT

Fees: 1-10 Units - \$100.00  
10+ Units - \$125.00

Cheques should be made payable to:  
Canadian Condominium Institute - Newfoundland and Labrador Chapter  
P.O. Box 23060 Churchill Square, St. John's NL A1B 4J9



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## INDIVIDUAL / PROFESSIONAL / BUSINESS PARTNER

Membership to June 30, 2018

How/from whom did you hear about CCI?: \_\_\_\_\_

MEMBERSHIP TYPE		Annual Fee	Fee Owning
Individual Membership	<input type="checkbox"/>	\$75.00	\$
Professional Membership	<input type="checkbox"/>	\$125.00	\$
Business Partner Membership	<input type="checkbox"/>	\$125.00	\$

### CONTACT INFORMATION

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Other

Name: \_\_\_\_\_

Company Name (if Professional or Business Partner): \_\_\_\_\_

Address: \_\_\_\_\_ Suite #: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Business Website: \_\_\_\_\_

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☐ I agree to receive electronic correspondence.

☐ I DO NOT wish to receive electronic correspondence.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### METHOD OF PAYMENT:

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