

APPLICATION FORM

BUSINESS MEMBER

Company Name: _____

Address: _____

City: _____ Postal Code: _____

Mailing Address (if different from above): _____

City: _____ Postal Code: _____

Phone: _____ Fax: _____

Toll Free: _____ Email: _____

Primary Contact:

Name: _____ Title: _____

Phone: _____ Cell: _____ Email: _____

Additional Company Contacts:

Secondary _____ Email: _____

Regulatory _____ Email: _____

Accounts Payable _____ Email: _____

Sales/Marketing _____ Email: _____

Human Resources _____ Email: _____

As a member in good standing of Meat & Poultry Ontario, I **subscribe to the "Code of Conduct" as a condition of membership.** Members shall; promote and foster fair trade practices in the best interests of consumers, members, suppliers, and the meat processing industry; shall maintain high standards to fully protect product safety, quality, and integrity; and shall comply with regulations and standards, as applicable to the goods and services they offer.

MPO VISION: Provide leadership for Ontario's meat and poultry industry by fostering innovation, promoting food safety and integrity, and recognizing excellence.

MPO MISSION: Strengthen Ontario's meat and poultry industry by working with stakeholders, responding to challenges and identifying opportunities on behalf of the membership.

Signature: _____ Date: _____

What prompted you to join?

- Collective Voice Consumer Outreach Government Advocacy Marketing Support
 Member Discounts Networking Technical Support Training Resources
 Referred by: _____ Other (specify): _____

Number of Employees:	Dues	HST	Total	
<input type="radio"/> 1 to 9 Employees	\$699.00	\$90.87	\$789.87	<input type="radio"/> Cheque Enclosed (payable to Meat & Poultry Ontario)
<input type="radio"/> 10 to 19 Employees	\$849.00	\$110.37	\$959.37	Charge to my: <input type="radio"/> VISA <input type="radio"/> MasterCard Expiry Date:
<input type="radio"/> 20+ Employees	\$1299.00	\$168.87	\$1467.87	Card #:
<input type="radio"/> 50+ Employees	\$2499.00	\$324.87	\$2,823.87	CVV #: (3 digits on back of card)
Valid for One Year from Date Received	HST (# 121262919)		Cardholder Name:	
<input type="radio"/> Electronic funds transfers and E-Transfers - Call for deposit info			Signature:	

Membership is subject to approval by the MPO Board of Directors. Membership in the Association may be terminated at the request, in writing, of the member; when a member fails to be current with membership dues; member declares bankruptcy or dissolution of the partnership, corporation or business entity; if conduct of the member is deemed by the Board to be detrimental to the interests of the Association. An aggrieved member shall have the right of appeal to the Board of Directors. Membership fees will not be refunded in whole or in part. MPO values the privacy of its members. All information collected is done so in accordance with our Privacy Policy. Email addresses provided on this form act as your consent to receive electronic communications from MPO. You may request to be removed from our lists at anytime.



