



# MEMBERSHIP APPLICATION

January 1, 2020 - December 31, 2020



## SPMAO, CPMA and NPMA Joint Membership

FIRM \_\_\_\_\_ OPERATORS LICENCE NO. (FOR JOINT MEMBERS ONLY - INCLUDE COPY OF LICENCE)REQUIRED \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ TITLE \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE/STATE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_ WEBSITE \_\_\_\_\_

REFERRED BY \_\_\_\_\_ YEARS IN BUSINESS \_\_\_\_\_

### MEMBERSHIP DUES

Please select your membership type.

- JOINT (Voting Membership)
- ALLIED (Voting Membership)
- ASSOCIATE (Non-Voting Membership)

|      | ASSOCIATE MEMBERSHIP<br><i>Associations/<br/>Educational Inst.</i> | ALLIED MEMBERSHIP<br><i>Equipment &amp;<br/>Chemical Supplier</i> |
|------|--|---|
| Dues | \$275.00   | \$325.00  |

### JOINT MEMBERSHIP *Pest Control Service Company*

| Dues Class                 | Annual Revenue        | National Dues | SPMAO Dues | Total Due |
|----------------------------|-----------------------|---------------|------------|-----------|
| <input type="checkbox"/> A | \$0 - \$249,000       | \$250         | + \$195    | = \$445   |
| <input type="checkbox"/> B | \$250,000 - \$499,000 | \$300         | + \$195    | = \$495   |
| <input type="checkbox"/> C | \$500,000 - \$999,000 | \$350         | + \$195    | = \$545   |
| <input type="checkbox"/> D | \$1M - \$2.5M         | \$600         | + \$195    | = \$795   |
| <input type="checkbox"/> E | \$2.6M - \$4.9M       | \$850         | + \$195    | = \$1,045 |
| <input type="checkbox"/> F | \$5M - \$9.9M         | \$1,500       | + \$195    | = \$1,695 |
| <input type="checkbox"/> G | \$10M - \$49.9M       | \$2,500       | + \$195    | = \$2,695 |
| <input type="checkbox"/> H | \$50M +               | \$5,000       | + \$195    | = \$5,195 |

### SPONSORS

| Sponsor Name | Address | Phone |
|--------------|---------|-------|
| 1. _____     | _____   | _____ |
| 2. _____     | _____   | _____ |

**Two Sponsors Required:**  
 1. One sponsor mandatory of a Pest Management Professional, SPMAO member or supplier.  
 2. One sponsor from an ethical professional, SPMAO member or supplier.

### PAYMENT INFORMATION

Send the application and payment to:  
 Structural Pest Management Association of Ontario (SPMAO)  
 1370 Don Mills Road, Suite 300, Toronto, Ontario, M3B 3N7

- My check is enclosed (Payable to SPMAO): # \_\_\_\_\_
- Please bill my:  VISA  MasterCard

\_\_\_\_\_  
CARD NUMBER

\_\_\_\_\_  
EXPIRATION DATE

\_\_\_\_\_  
SECURITY CODE

\_\_\_\_\_  
CARDHOLDER NAME

\_\_\_\_\_  
SIGNATURE

*This application is a submission for membership. All membership applications are subject to approval by the SPMAO Board of Directors. No company is eligible for membership benefits or use of logos until final approval is received.*

**THANK YOU FOR YOUR SUPPORT!**

Questions? Please contact us at [info@spmao.ca](mailto:info@spmao.ca)  
 1370 Don Mills Road, Suite 300, Toronto, Ontario M3B 3N7  
[www.spmao.ca](http://www.spmao.ca) | 833.543.4919 or 416.424.6628

For Internal Use Only      Date Received: \_\_\_\_\_      Date Approved: \_\_\_\_\_