

2018 Membership Application and Renewal Form

The following information is important as it provides CTRF with a better understanding of the characteristics and interests of our members and, thus, helps us to provide better services to you. Please print clearly.

Name: _____
 Title: _____
 Organization: _____
 Mailing Address: _____
 City: _____ Province/State: _____ P. Code/Zip: _____
 Telephone: _____ Country: _____
 Email: _____

My name and contact information may be published in the CTRF Directory: Yes No

Please indicate your language preference: English French

I am a: New Member Renewing 2017 Member Member prior to 2017 (but not in 2017)

Type of Employer/Organization:

- | | |
|---|---|
| <input type="checkbox"/> Federal Government/Agency/Corp. | <input type="checkbox"/> Private Sector - Consultant |
| <input type="checkbox"/> Provincial/Territorial Government/Agency/Corp. | <input type="checkbox"/> Manufacturer/Distributor/Retailer/other Industry |
| <input type="checkbox"/> Municipal Government/Agency/Corp. | <input type="checkbox"/> Carrier |
| <input type="checkbox"/> University/College | <input type="checkbox"/> Terminal Operator/Logistics Provider |
| <input type="checkbox"/> Not-for-Profit | <input type="checkbox"/> Retired |
| <input type="checkbox"/> Other, please specify: _____ | |

Occupational/Policy/Research Focus (please check all that apply):

- | | | | | |
|---|--|---|------------------------------|--|
| <input type="checkbox"/> Marine | <input type="checkbox"/> Rail | <input type="checkbox"/> Road | <input type="checkbox"/> Air | <input type="checkbox"/> Policy & Planning |
| <input type="checkbox"/> Public Transit | <input type="checkbox"/> Environment | <input type="checkbox"/> ITS | <input type="checkbox"/> R&D | <input type="checkbox"/> Safety & Security |
| <input type="checkbox"/> Pipeline | <input type="checkbox"/> Logistics/Supply Chain Mgmt | <input type="checkbox"/> Other, please specify: _____ | | |

Membership Category: (CTRF HST# R126274562). Please provide Sales Tax exemption #, if applicable: _____

- | | |
|--|---|
| <input type="checkbox"/> Individual - \$169.50 (\$150.00 + \$19.50 HST) | <input type="checkbox"/> Scholarship Applicant |
| <input type="checkbox"/> Full-time Student - \$33.90 (\$30.00 + \$3.90 HST) | <input type="checkbox"/> Student Paper Prize Winner |
| <input type="checkbox"/> Senior 65+ - \$107.35 (\$95.00 + \$12.35 HST) | <input type="checkbox"/> Faculty Adv. of Student Paper Prize Winner |
| | <input type="checkbox"/> Honorary Life Member |

Students Only: I am a member of the Montreal Student Chapter: Yes No

Method of Payment:

Cheque made payable to **Canadian Transportation Research Forum**

Charge my: Visa Master Card

Card Number: _____ Expiry Date: _____

Cardholder Signature: _____ Name on Card: _____

Please note: It is the practice of the CTRF to send correspondence to its members via email. If you are unable to accept items by email, please notify the CTRF office.