

## 2019 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 2018 Member  Member prior to 2018 (but not in 2018)

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 - <b>\$169.50</b> (\$150.00 + \$19.50 HST)     | <input type="checkbox"/> Scholarship Applicant                      |
| <input type="checkbox"/> Full-time Student - <b>\$33.90</b> (\$30.00 + \$3.90 HST) | <input type="checkbox"/> Student Paper Prize Winner                 |
| <input type="checkbox"/> Senior 65+ - <b>\$107.35</b> (\$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.