



## APPLICATION FOR SUPPLIER MEMBERSHIP

I hereby make an application for membership in the ISLAND EQUIPMENT OWNERS ASSOCIATION and, upon approval of my application, do hereby agree to abide by the by-laws and code of ethics of the Association. I will maintain a high standard of workmanship and business ethics in order to be a credit to the ISLAND EQUIPMENT OWNERS ASSOCIATION and the construction industry.

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

Company Representative: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Fax: \_\_\_\_\_ No. of years in business: \_\_\_\_\_

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

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

This application was presented to me by IEOA Member:

\_\_\_\_\_

***Dues for all members are \$375.00 per year (plus 5% GST)***

**Membership year – July 1<sup>st</sup> – June 30<sup>th</sup>**

Cash, Cheque, Visa and Mastercard accepted

For Office Use:

Received Directors Approval Invoice Website Handbook Email Newsletter Decals

Three IEOA Members with whom you are acquainted:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Tell us about your business and what you can offer the members:

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I hereby pledge this Company or Firm, through its representative, to support and promote the projects of the Island Equipment Owners Association for the general good and welfare of the construction industry and the membership as a whole.

X \_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**

Applicable membership dues payment must accompany this application. All applications for membership must pass one reading at the first Director's Meeting following receipt of application.

**Please forward completed form to: IEOA 25 Cadillac Ave, Victoria, BC V8Z 1T3**  
**• Phone: 250-382-4362 • Fax: 250-384-0141 • Email: info@ieoa.ca • Web: ieoa.ca**