

Member Registration

5-50 Terminal St., North Bay, ON, P1B8G2 | Ph: 1-705-474-1080 | TF: 1-877-636-2626 F: 1-705-474-2379 | amco@amco.on.ca | www.amco.on.ca

Please complete this application and return with payment to the AMCO office. If payment is made by credit card, you can call the Council to make arrangements, or you can complete the information below for processing. Business Member information will be posted online within our Business Member Directory. All Member information will be published in AMCO's membership directory.

Company/Airport/Aerodrome Name:						
Primary Member Contact: Mr. / Mrs. / Ms	·	_Title:				
Address:	City:					
Province: Postal Code:						
Phone:	Fax:	Toll Free:				
E-Mail:	Company Website:					

Membership Type: (please use the left column to indicate [X] which one applies)

Aerodrome Member	A registered aerodrome	\$475 + HST
Airport Member, Small	Certified airports which generate \$0 to \$500,000 in gross revenue annually.	\$671 + HST
Airport Member, Medium	Certified airports which generate \$500,001 to \$1,000,000 in gross revenue annually.	\$1005 + HST
Airport Member, Large	Certified airports which generate over \$1,000,000 in gross revenue annually.	\$1480 + HST
Business Member	Company which has products or services to sell/provide to the airport industry.	\$671 + HST
Associate Member	Individuals and non-profits who do not have products or services to sell/provide.	\$671 + HST
Sustaining Member	Includes membership, 2 convention registrations, and a financial contribution	\$3012 + HST

Business Members please briefly describe services or products:

(this information will be displayed on your directory listing)

How did	vou	hear	about	AMCO?
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Yes, I will allow my information to be displayed on the membership list, & my company information given as referrals. (Under the Privacy Legislation Act, we require your permission)

No, please contact me to clarify

How can the Airport Management Council of Ontario help you get the most out of your membership?

(i.e. Networking, Advertising, Training)

PAYMENT METHOD

Please find enclosed my cheque payable to the

Airport Management Council of Ontario (AMCO)

- Purchase Order # ____
- Upon receipt of this form, please charge my (Circle one): MasterCard Visa

(Cardholder) Name on Card:

Account #:

Exp. Date: _____ Signature: ____