

NEW ASSOCIATE MEMBERSHIP APPLICATION FORM

January to December Dues are \$650.00 Plus GST

COMPANY: _____

ADDRESS: _____

TELEPHONE: _____ FAX: _____

E-MAIL: _____ WEB SITE: _____

NAME: _____

BRIEFLY DESCRIBE YOUR COMPANY'S BUSINESS AND
ASSOCIATION TO THE MEMBERS OF THE MANITOBA MOTOR
DEALERS.

(This info is used in our newsletter to introduce you to our members.)

DATE: _____ SIGNATURE: _____

We appreciate your interest in becoming part of our association.
Please forward this application and your cheque to:

The Manitoba Motor Dealers' Association
230 -530 Century Street
Winnipeg, MB
R3H 0Y4

Please call us at 204-985-4200 if you have any
questions.