

MEMBERSHIP APPLICATION

Company Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Fax: _____

Contact Person (s) _____

Email Address: _____

Membership Categories: Please Check One

Independent Tire Dealer Retreader Jobber/Distributor Manufacturer Other

Annual Dues - \$100 per year plus G.S.T. = \$ 105.00

BENEFITS:

- Visa & MasterCard

...1.69% on Card Swiped Transactions

...2.29% on non-swiped Transactions

... .09 Cents per Transaction

-Federated Insurance – Preferred Insurance Rates and Employee Benefit Program

-Esso Petroleum – 2.5 cents per liter discount on fuel

-TRACKER Newsletter – 5 times per year at no charge

-Classified advertisements in the Tracker at no charge to dealer members

-Member ship Directory

-Tire Technician Training and Certification Program

-WCTD representation on provincial Scrap Tire Recycling Programs

-Scholarship Program 5 \$2000 Scholarships per year

Please either return this application with a check or please provide your credit card information below

Visa or M/C # _____ Expiry Date: _____

Name on Card: _____

Western Canada Tire Dealers –P.O. Box 58047 Chaparral RPO, Calgary AB. T2X 3V2

Phone: (403) 264-3179, Fax (403) 264-3176 Email Address: andy@wctda.ca